(1/4)

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email	Address:							

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BKIS, LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help B. BOSTICK

APR 18 2014

EXAMINED 4/17/2014

COVER LETTER

	stration sion of (Section Corporations				
SUBJECT:	BKIS, I	Lic	_	·		
		Name of Foreig	gn Limited L	iability Com	pany	
Dear Sir or N	∕ladam:					
The enclosed	d applica	ation, certificate and fee(s)	are submitte	d for filing.		
Please return	all corr	espondence concerning th	is matter 10 t	he following	;	
April Johnson	ı					
		Name of Person				
BKIS, LLC						
		Firm/Company				
601 Riverside	Avenue					
		Address				
Jacksonville, I	FL 32204	1				
		City/State and Zip Code	Ġ			
april.johnson@	බ්bkfs.co	m				
		o be used for future annual	report notif	ication)		
	-		•			
For further in	nformati	on concerning this matter,	please call:			
April Johnson	1		at (<u>904</u>	× 854-525	56	, .
<u> </u>		e of Person	Area Co	de & Daytir	ne Telephone Number	
				3447	ING ABBRECE.	
STREET/COURIER ADDRESS: Registration Section			MAILING ADDRESS: Registration Section			
Division of Corporations			Division of Corporations			
Clifton Building			P.O. Box 6327			
2661	Execut	ive Center Circle Florida 32301			assee, Florida 32314	
Enclosed is a \$25 Filing		for the following amount \$30 Filing Pee & Certificate of Status	🔲 \$55 Fil	ing Fee & ed Copy	☐ \$60 Filing Fee, Certificate of Status	3 &
CR2E055 (12/13	31				Certified Copy	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-3 must be completed)

 Name of limit State: BKIS, I 	ted flability Company as it app	cars on the records of the		_
2. Jurisdiction of	of its organization: Delaware		m110000)05517 -
3. Date authoriz	æd to do business in Florida: _	1/29/2011		-
SECTION II (4	-7 complete only the applical	ble changes)		
4. New name of	the limited liability company:	Black Knight Financial Techn (must contain "Limited Liability C	iology Solutions, LLC Company, ""LLC," or "LLC	<u></u> ")
Florida and attact the alternate name or "LLC.")	able, enter alternate name adop the a copy of the written consente. The alternate name must consente the consenter that the consenter changes the jurisdiction of	t of the managers or managers	ging members adopting company," "L.L.C."	- 5
	nent changes person, title or ca			
aforemention	n original certificate, if require ed amendment(s), duly authen nder the law of which this enti	ticated by the official havi	ng custody of records in	— n the
1				
•		pril L. Johnson		
	Typed or p	rinted name of signee	••	2014
	19ilin	g Fee: \$75.00	٠.	-

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "BKIS, LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "BLACK KNIGHT FINANCIAL TECHNOLOGY SOLUTIONS, LLC", THE TWENTY-FIFTH DAY OF MARCH, A.D. 2014, AT 2:47 O'CLOCK P.M.

4765502 8320

140483711

You may verify this cortificate online at corp.delaware.gov/authwer.shtml

Jeffrey W. Bullock, Secretary of State

DATE: 04-17-14