Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H140001125073)))



H140001125073ABCV

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023

: (850)222-1092

Phone 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.

Empil	Address:		
	MILL GOD .		

RECEIVED May 12 AM 10: 00

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ACK KNIGHT MORTGAGE PROCESSING SOLUTIONS, LLC

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

MAY 13 2014

A. LUNT

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT; Black Knight Mortgage Processing	Solutions, LLC			_	
Name of Fore	ign Limited L	ability Com	pany		
Dear Sir or Madam:					
The enclosed application, certificate and fee(s	s) are submitte	d for filing.			
Please return all correspondence concerning t	his matter to t	he following	; :		
April Johnson					
Name of Person					
Black Knight Mortgage Processing Solutions, LLC					
Firm/Company				= 6.	
601 Riverside Avenue				11.C	
Address				2014 BAY 12 TALLAHASSE	
Jacksonville, PL 32204					- 4L - 1
City/State and Zip Co	de			PHIZ: 09 SENIALE ELPLOPHE	27
april.johnson@bkfs.com				55 K	••.
E-mail address: (to be used for future annu	al report notif	cation)		977 99	
For further information concerning this matte	at (904	854-52			
Name of Person	Area Co	ide & Daytii	me Telephone Numbe	er	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassec, Florida 32301		Regist Divisi P.O. E	LING ADDRESS: tration Section on of Corporations Box 6327 tassee, Florida 32314		
Enclosed is a check for the following amou \$\infty\$ \$25 Filing Fee \$\infty\$ Certificate of Statu CR2E055 (12/13)	🖵 \$55 Fil	ing Fee & ed Copy	□ \$60 Filing Fee, Certificate of St Certified Copy	atus &	

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)

1. Name of limited liability Company as it appears on the records of the Florida Departm State: Black Knight Mortgage Processing Solutions, LLC	ent of			
2. Jurisdiction of its organization: Delaware	1 20			
3. Date authorized to do business in Florida: 02/19/2014	TANK Y			
SECTION II (4-7 complete only the applicable changes)				
4. New name of the limited liability company: Black Knight Technology Solutions, LLC (must contain "Limited Liability Company," "LLC."				
(If name unavailable, enter alternate name adopted for the purpose of transacting busines Florida and attach a copy of the written consent of the managers or managing members at the alternate name. The alternate name must contain "Limited Liability Company," "L.L. or "LLC.") 5. If the amendment changes the jurisdiction of organization, indicate new jurisdiction: 6. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e) that change:	dopting C,"			
7. Attached is an original certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of rejurisdiction under the law of which this entity is organized. Signature of the autherized representative April L. Johnson				
Typed or printed name of signee				

Filing Fee: \$25.00

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "BLACK KNIGHT MORTGAGE PROCESSING SOLUTIONS, LLC", FILED A CERTIFICATE OF MERGER, CHANGING ITS NAME TO "BLACK KNIGHT TECHNOLOGY SOLUTIONS, LLC", THE TWENTY-FOURTH DAY OF MARCH, A.D. 2014, AT 11:38 O'CLOCK A.M.

4471057 8320

140490077



AUTHENT CATION 1309363

DATE: 04-18-14