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(Requestor's Name)	
(Address)	
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(Äddress)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	1
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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Tecora Bell | tecora.bell@cscglobal.com

Date: September 12, 2017

Order#: 772450/022

Re: REALHOME SERVICES AND SOLUTIONS, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Tecora Bell c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

-	· III	; 607.0502, 617.0502,					s, this
-	· 11	a corporation organiz		-	-		
	- 11	ered office or register			state of	Florido	<i>1</i> .
1. The name of t	he corporation: REAL	HOME SERVICES A	ND SOLUTION	NS, INC.			
•	office address:						
1000 Aberna	thy Rd Ste 245 Atlar	nta GA 30328-5604					
~	ddress (if different):_ nathy Rd Ste 200 A	tt: Corporate Secreta	y Atlanta, GA	30328-56	04		
4. Date of incorp	poration/qualification	09/03/2008	Document	number: _	P08000	081336	5
5. The name and	street address of the	current registered age signed, enter resigned	ent and registere				
	C T CORPORATIO	N SYSTEM				_	
	1200 SOUTH PINE	ISLAND ROAD				_	
	PLANTATION		FL	33324			
6. The name and (if changed):	street address of the	new registered agent	(if changed) an	d /or regis	stered o: ⇒	<u>.</u> _	
	Corporation Service	: Company				S 4483	شامشاه
	1201 Hays Street				\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	SEP 1	
	Tallahassee	P.O. Box. NOT ac	reptable FL	32301	Tink Tink Tink Tink	Æ ⊳	Pr:
The street addre as changed will	 ss of its registered o be identical	ffice and the street ad	dress of the bu	siness of	ice of [ह्य इ regis	tered agent,
Such change wa authorized by th	is authorized by resone board, or the corpo	lution duly adopted b bration has been notif	y its board of died in writing o	lirectors of the chai	r by an nge.	officer	† so
	90 G se	mer .	Jill Cilmi, Vice F				
I hereby accept I further agree to performance of agent. Or, if thi	o comply with the pr my duties, and I am is document is being	egistered agent and a visions of all statute familiar with and account merely to reflect has been notified in v	agree to act in es relative to th ept the obligat t a change in th writing of this c	ie proper ion of my he regisiei	city. and con position	mplete n as rej	gistered ress, I
By: A AN	nature of Registered Agent	1000 -	09/11/2017	Date			
_	half of an entity:						
Grace E. Kirby,	Asst. Vice President						
Ty	ped or Printed Name						
		* * * FILING FEE:	\$35.00 * * *				
		Maria de la compansión					

Make check's payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314