# M1200000616

(Requestor's Name)
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(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
•
(Document Number)
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February 17, 2017

Via UPS Overnight Courier

Florida Department of State

Division of Corporations—Amendment Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Amendment to Foreign Registration - Name Change

Dear Florida Division of Corporations,

Regarding the attached entity's recent name change in its domestic State of formation, enclosed is our *Application By Foreign Limited Liability Company To File Amendment To Application For Authorization To Transact Business In Florida*, with attached evidence from its domestic State of formation. Also enclosed is our check for payment of your processing fees.

Upon filing, please return file-marked copies of same to the following person (a self-addressed envelope is provided):

Kathy L. Brown, Paralegal Conduent Business Services, LLC 2828 N. Haskell Ave, Bldg 1, 9<sup>th</sup> Floor Dallas, Texas 75204

Thank you for your assistance, and please don't hesitate to contact me directly, should you have any questions or concerns.

Sincerely,

Kathy Brown

Corporate Paralegal

Conduent Business Services, LLC

Direct Dial: 214-841-6346

## **COVER LETTER**

Divi	sion of Co	rporations			
SUBJECT:	Xero	x Commercia			
		Name of Foreign	n Limited Liability C	ompa	ny
Dear Sir or N	Madam:				
The enclosed	d applicati	on, certificate and fee(s) a	are submitted for fili	ng.	
Please return	all corres	pondence concerning this	matter to the follow	ving:	
Kathy	Brow	n			
		Name of Person			
Condu	ent Bu	ısiness Service	es, LLC		
		Firm/Company			
2020 N	и <b>Ц</b> а	akall Ava Otl	h Eloor		
2020 1	<b>ч</b> . па	skell Ave., 9tl	TIOOI		
		Address			
<b>Dallas</b>	, TX	75204			
		City/State and Zip Code	·		
cbs.lea	ıal-cor	porate@condu	ient.com		
		be used for future annual			
For further is	nformatio	n concerning this matter, j	-		
Kathy	Brow	n	at $(214)$ $84$	41-1	6346
	Name	of Person	Area Code & Da	aytime	Telephone Number
		URIER ADDRESS:			NG ADDRESS:
Registration Section			Registration Section		
Division of Corporations Clifton Building			Division of Corporations P.O. Box 6327		
2661 Executive Center Circle		Tallahassee, Florida 32314			
Talla	ahassee, F	lorida 32301			
		or the following amount	_		_
☐ \$25 Filin	g Fee	\$30 Filing Fee & Certificate of Status	\$55 Filing Fee & \$60 Filing Fee, Certified Copy Certificate of S		
		Sermicate of Status	Certified Cop	'Y	Certificate of Status & Certified Copy

TO: Registration Section

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

#### SECTION I (1-4 must be completed)

State: Xerox Commercial Solution		
Enter new principal office address, if applicable:		
( <u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u> )		
Enter new mailing address, if applicable:		17
(Mailing address MAY BE A POST OFFICE BOX)		77
MAT BE AT OUT OFFICE BOX		20
2. The Florida document number of this limited li	ability company is: M12000	0000616 <del>క</del> అ
2. The Florida document hamour of this immed in	domity company is:	Ď
3. Jurisdiction of its organization: Nevada		<u>ట</u>
4. Date authorized to do business in Florida: 2/1	1/2012	
SECTION 11 (5-9 complete only the applicable	changes)	
	Conduent Commercia	
(mu	st contain "Limited Liability Co	ompany, ""L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopte copy of the written consent of the managers or ma must contain "Limited Liability Company," "L.L.  6. If amending the registered agent and/or register	anaging members adopting the a C." or "LLC.")	alternate name. The alternate name
registered agent and/or the new registered office a		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Flori	da Street Address
	City	, Florida Zip Code
	•	Zip Code
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered age the provisions of all statutes relative to the proper and accept the obligations of my position as regis document is being filed to merely reflect a change	ent and agree to act in this cape r and complete performance of stered agent as provided for in (	my duties, and I am familiar with Chapter 605, F.S. Or, if this

. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:					
itle/ Capacity	<u>Name</u>	Address	Type of Action		
		,	Add		
			Remove		
			∏Add		
			Remove		
			Add		
			Remove		
			Add		
			Remove :		
			Adjr School		

Signature of the authorized representative

James Michael Peffer, Manager

Typed or printed name of signee

Filing Fee: \$25.00

SECRETARY OF STATE



## **CERTIFICATE OF NAME CHANGE**

I, BARBARA K. CEGAVSKE, the duly qualified and elected Nevada Secretary of State, do hereby certify that on February 15, 2017, a Certificate of Amendment to its Articles of Organization changing the name to **CONDUENT COMMERCIAL SOLUTIONS, LLC**, was filed in this office by **XEROX COMMERCIAL SOLUTIONS, LLC**. Said change of name has been made in accordance with the laws of the State of Nevada and that said Certificate of Amendment is now on file and of record in this office.



Certified By: Nita Hibshman
Certificate Number: C20170215-1066
You may verify this certificate
online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on February 15, 2017.

BARBARA K. CEGAVSKE
Secretary of State





BARBARA K. CEGAVSKE Secretary of State 202 North Carson Streat Carson City, Nevada 89701-4201 (775) 684-5708 Website: www.nvsos.gov

# Amendment to **Articles of Organization**

(PURSUANT TO NRS 86.221)

Filed in the office of Document Number Barbora K. Cogaste

Barbara K. Cegavske Secretary of State State of Nevada

20170067801-62

Filing Date and Time

02/15/2017 8:52 AM

Entity Number

C2021-1990

USE BLACK DIK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE CHLY

#### Certificate of Amendment to Articles of Organization For a Nevada Limited-Liability Company (Pursuant to NRS 86.221)

<ol> <li>Name of limited-liability company</li> </ol>	<i>y</i> :			
Xerox Commercial Solutions, LLC			•	
***		•		ma .
2. The company is managed by:	<b>X</b> Managers	OR (check only one box)	Memb	ers
3. The articles have been amended	as follows: (provid	e article numb	ers, if availat	ole)*
Article I: The name of the limited liability con	apany is Conducat Con	nmercial Solution	s, LLC	The state of the s
-				a contract of the contract of
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	, , and on the case demonstrated a			400 mm - 1 mm -
	1	مرد المعادد عوال بدا مهدود دعورا ما المعادد عوال بدائر		and the second of the second second second
4. Effective date and time of filing:	(optional) Date:;	2/15/2017	J Time:}_	المحمد الماري الداعة المحمدة السود اليدام 1975 السيد ما إلى
	(mus	t not be later than	90 days after the	certificate is filed)
5. Signature (must be signed by at le	east one manager	or by a manag	ing member)	:
		_	_	
X Mohal KM	<u></u>			
Signature /V				

\* 1) If amending company name, it must contain the words "Limited-Liability Company," "Limited Company," or "Limited," or the abbreviations "Ltd.," "L.L.C.," or "L.C.," "LLC." or "L.C.." The word "Company" may be abbreviated as "Co."

2) If adding managers, provide names and addresses.

**FILING FEE: \$175.00** 

IMPORTANT: Failure to include any of the above information and submit with the proper fees may cause this filing to be rejected. Hevada Socretary of State 86.221 DLLC Amendment Revised: 1-5-15 This form must be accompanied by appropriate fees.

#### STATE OF NEVADA

#### BARBARA K. CEGAVSKE Secretary of State

#### KIMBERLEY PERONDI

Deputy Secretary for Commercial Recordings



#### Commercial Recordings Division

202 N. Carson Street Carson City, NV 89701-4201 Telephone (775) 684-5708 Fax (775) 684-7138

### **Certified Copy**

February 15, 2017

Job Number:

C20170215-1066

**Reference Number:** 00010551831-44

Expedite:

Through Date:

The undersigned filing officer hereby certifies that the attached copies are true and exact copies of all requested statements and related subsequent documentation filed with the Secretary of State's Office, Commercial Recordings Division listed on the attached report.

**Document Number(s)** 20170067801-62

Description Amendment **Number of Pages** 1 Pages/1 Copies

Certified By: Nita Hibshman Certificate Number: C20170215-1066

You may verify this certificate online at http://www.nvsos.gov/ Respectfully,

BARBARA K. CEGAVSKE Secretary of State

Commercial Recording Division

202 N. Carson Street Carson City, Nevada 89701-4201 Telephone (775) 684-5708 Fax (775) 684-7138