

2019 FOREIGN LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M07000007257

Entity Name: CENTEX SERVICE COMPANY, LLC**Current Principal Place of Business:**3350 PEACHTREE ROAD NE
SUITE 150
ATLANTA, GA 30326**Current Mailing Address:**3350 PEACHTREE ROAD NE
SUITE 150
ATLANTA, GA 30326 US**FEI Number:** 75-1588412**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:** MICHELE L. ABBOTT

05/01/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	VP	Title	VICE PRESIDENT AND TREASURER
Name	HILL, KIMBERLY M	Name	LANGEN, D. BRYCE
Address	3350 PEACHTREE ROAD NE SUITE 150	Address	3350 PEACHTREE ROAD NE SUITE 150
City-State-Zip:	ATLANTA GA 30326	City-State-Zip:	ATLANTA GA 30326
Title	PRESIDENT, MANAGER, DIRECTOR	Title	SECRETARY
Name	SHELDON, TODD N.	Name	MATUREN, ELLEN PADESKY
Address	3350 PEACHTREE ROAD NE SUITE 150	Address	3350 PEACHTREE ROAD NE SUITE 150
City-State-Zip:	ATLANTA GA 30326	City-State-Zip:	ATLANTA GA 30326
Title	ASST. SECRETARY	Title	ASST. SECRETARY
Name	CONLON, KELLYMARIE M.	Name	VOILES, CHANDLER
Address	3350 PEACHTREE ROAD NE SUITE 150	Address	3350 PEACHTREE ROAD NE SUITE 150
City-State-Zip:	ATLANTA GA 30326	City-State-Zip:	ATLANTA GA 30326
Title	ASST. TREASURER	Title	ASST. SECRETARY
Name	RIVES, GREGORY S.	Name	IRWIN, ROSS
Address	3350 PEACHTREE ROAD NE SUITE 150	Address	3350 PEACHTREE ROAD NE SUITE 150
City-State-Zip:	ATLANTA GA 30326	City-State-Zip:	ATLANTA GA 30326

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KELLYMARIE M. CONLON

ASSISTANT SECRETARY 05/01/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title	ASST. SECRETARY
Name	FRATTER, ERIC
Address	3350 PEACHTREE ROAD NE SUITE 150
City-State-Zip:	ATLANTA GA 30326