F00000005619

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
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Office Use Only



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SECRETARY OF STAIR

JUN 2 8 2016 C. CARROTHERS



CSC - WILMINGTON (%)
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscqlobal.com

Date: June 20, 2016

Order#: 182613-011

Re: CUSTOM BENEFIT PROGRAMS, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.....

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Janis M. Smith c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

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

QUCA.XCOA

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

	provisions of sections 607.0502, 617.050 ange is submitted for a corporation orga				
	r to change its registered office or regist				
1. The name of	the corporation: CBP TECHNOLOGIES,	, INC.		·	
• •	office address: ENEFIT PROGRAMS, INC. 897 12TH S	STREET, HAMMO	ONTON, NJ 08037	· · · · · · · · · · · · · · · · · · ·	
3. The mailing a	address (if different): 200 Summit Lake [Orive, Suite 350,	Valhalla, NY 10595		
4. Date of incorp	poration/qualification:09/15/2000	Document	number: F00000005619) 3/- (// esub	
	d street address of the current registered a rtment of State: (If resigned, enter resign		red office on file with the	SCORE AND ADDRESS OF THE PROPERTY OF THE PROPE	
	CT CORPORATION SYSTEM			4 22 ASS	
	CT CORPORATION SYSTEM			HA HA	
	PLANTATION	FL	33324	1.08.11 2.27.12 2.47.12 3.47.1	
6. The name and (if changed):	d street address of the new registered age Corporation Service Company	ent (if changed) ar	nd /or registered office	- vigov	
	1201 Hays Street		·		
	P.O. Box NOT acceptable				
	Tallahassee	FL	32301		
The street address changed will	ess of its registered office and the street be identical.	address of the bu	usiness office of its regis	tered agent,	
Such change wa authorized by th	as authorized by resolution duly adopted ne board, or the corporation has been no	d by its board of outling of the distriction of the	directors or by an officer of the change.	SO	
	e E Comi	Jill Cilmi, Vice			
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered agent an to comply with the provisions of all stat my duties, and I am familiar with and a is document is being filed merely to refi that the corporation has been notified i on Service Company	nd agree to act in tutes relative to th accept the obligat lect a change in t	he proper and complete tion of my position as res the registered office addr	gistered ess, I	
By: Signature of Registered Agent Date					
_	chalf of an entity:		Date		
	, Assistant Vice President				
	yped or Printed Name				
	* * * FILING FR	EE: \$35.00 * * *			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314