F01000005074

| (Re | questor's Name) | | | |
|---|--------------------|-------------|--|--|
| (Ad | dress) | | | |
| (Ad | dress) | | | |
| (Cit | ty/State/Zip/Phone | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Business Entity Name) | | | | |
| (6) | | | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Office Use Only



400291079074

400291079074 10/12/16--01026--007 **35.00

ZELE COT 12 PH 4: 04

RARDICHS

OCT 14 2016

I ALBRITTON



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: October 10, 2016

Order#: 324455-005

Re: GLOBAL GRAPHICS SOFTWARE, 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: Ami Casper

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

| statement of ch | ange is submitted for a corpora | 2, 617.0302, 607.1308, or 617.1308, Ftoriaa Statut ition organized under the laws of the State of <mark>Mass</mark> e or registered agent, or both, in the State of Florid | achusetts |
|--|---|--|-----------------------|
| 1. The name of | the corporation: GLOBAL GRA | APHICS SOFTWARE, INC. | |
| 2. The principa | l office address: 281 Winter Str | reet, Suite 320, Waltham, MA 02451 | |
| 3. The mailing | address (if different): | | |
| 4. Date of incom | rporation/qualification: 09/27/2 | 2001 Document number:F0100000507 | 74 |
| | nd street address of the current re artment of State: (If resigned, en | egistered agent and registered office on file with the iter resigned) | 9 |
| | Brown, Jordan | | 0 |
| | 1200 South Pine Island Road | i | 2016 0007 |
| | Plantation, FL 33324 | | 2 |
| 6. The name an (if changed): | | stered agent (if changed) and /or registered office | PH FI CU |
| | Corporation Service Compan | ny 3 | |
| | 1201 Hays Street | | |
| | P Tallahassee | P.O. Box NOT acceptable FL 32301 | |
| • | <u> </u> | | |
| | | the street address of the business office of its regi | |
| Such change wanthorized by | | ly adopted by its board of directors or by an office as been notified in writing of the change. | |
| Signal | fure of an officer or director | ROMAND IN PRINTED AND ACKER Printed or typed name and title | WONTHINT |
| perjormance o agent. Or, if the hereby confirn | y my aunes, and 1 am Jaminar v his document is heing filed mer | d agent and agree to act in this capacity. of all statutes relative to the proper and complete with and accept the obligation of my position as re rely to reflect a change in the registered office ada notified in writing of this change. | egistered Iress, I |
| By: Sym | ignature of Registered Agent | 10/10/2016 | |
| | pehalf of an entity: | Date | |
| | | | |
| | et, Asst. Vice President Typed or Printed Name | | |
| | | | |

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

* * * FILING FEE: \$35.00 * * *