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To:

Division of Corporations Fax Number : (85C)617-6380

From:

Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (850)205-8842 Fax Number : (850)878-5368



Email Address:

REGISTERED AGENT CHANGE EBAY REAL ESTATE INC.

Certificate of Status	0
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7/21,2015 4:16:38 PM From: To: 8506176380(2/2)

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

1. The name of the corporation: EBAY REAL ESTATE INC.

2. The principal office address: 2065 HAMILTON AVENUE SAN JOSE, CA 95125

3. The mailing address (if different):_

4. Date of	incorporation/qualification:	Document number	F02000001554

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

NRAI SERVICES, INC.

1200 South Pine Island Road Plantation, FL 33324

6. The name and (if changed):	nd street address of the new registered agent (if changed) and /or registered offic :		15 JUL 2 1	
	C T Corporation System	779-1 779-1	179	野野
	c/o C T Corporation System, 1200 South Pine Island Road	고 고 ::	:е н	Ő
	P.O. Box NOT acceptable Plantation, Florida 33324			

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was hyporized by resolution duly adopted by its board of directors or by an officer so authorized by the poerd, or the corporation has been notified in writing of the change.

ature of an officer or director

Jennifer Kurz, Vice-President
Printed or typed name and title

I hereby uncept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

propartion System 7/17/2014 By: Date egistered Agent Signature Alfred Younan

If signing on behalf of an entity: Assistant Secretary

Typed or Printed Name

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

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