Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : INCORP SERVICES INC

Account Number : I20120000007 Phone : (702)866-2500

Fax Number : (702)866-2689

annual report mailings. Enter only one email address please.**

Email Address: managedreports@incorp.com

REGISTERED AGENT CHANGE SAPIENS AMERICAS CORPORATION

**Enter the email address for this business entity to be used for fugit

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Corporate Filing Menu

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COVER LETTER

TO: Amendment Section of Corp					
SUBJECT:	Sapiens Americas	Corporation			
· -··	Name of C	orporation			
DOCUMENT NUMBER	R:F02	2000002110			
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Karen Gibson Name of Contact Person					
InCorp Services, Inc.					
	Firm/Co	ompany			
3773 Howard Hughes Pkwy. Suite 500s					
	Add	ress			
	Las Vegas, NV 89169-6014				
City/State and Zip Code					
	•				
	managedreports	®incorp.com			
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Karen Gibson on behal	f of InCorp Services, Inc.	at (702) 866-2500 ext 6927			
Name of 6	Contact Person	at (702) 866-2500 ext 6927 Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Department of State,					
<u>.</u>	Mailing Address: Amendment Section	Street Address: Amendment Section			
	Division of Corporations	Division of Corporations			
	P.O. Box 6327	Clifton Building			
1	Tallahassee, FL 32314	2661 Executive Center Circle			
		Tallahassee Fl 32301			

CR2E045(03/12)

H190002501183

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

		617.0502, 607.1508, or 617.1508, Flor	
-	-	on organized under the laws of the State	·
	• •	or registered agent, or both, in the State	e of Florida
1. The name of the	ne corporation: Sapiens Amori	icas Corporation	<u>. </u>
2. The principal	office address: 801 Corporate	Center Drive STE, 320, Raleigh, N	C 27607

3. The mailing ac	ddress (if different);		
4. Date of incorp	oration/qualification:04/2	25/2002 Document number:	F02000002110
5. The name and	•	istered agent and registered office on fi	le with the
-	В	rown, Maria	三 石的 西
	908	9th Street, W	_ Aug
_	Brade	enton, FL 34205	
6. The name and (if changed):	street address of the new registo	ered agent (if changed) and /or registere	d office
-	InCor	p Services, Inc.	
	17888	67th Court North	, <u>, , , , , , , , , , , , , , , , , , </u>
, -	P.O.	Box NOT acceptable	
_	Loxaha	tchee, FL 33470	<u> </u>
		e street address of the business office (
Such change was authorized by the	authorized by resolution duly board, or the corporation has l	adopted by its board of directors or by been notified in writing of the change.	an officer so
My nor R	, Nou-	Gina Rubendall, Secretary	<i>t</i>
Signature I hereby accept to I further agree to performance of n agent. Or, if this hereby confirm the	or un other or uncetor ine appointment as registered at camply with the provisions of ty duties, and I am familiar wit document is being filed merely that the corporation has been no	Printed of typed name a gent and agree to act in this capacity. all statutes relative to the proper and h and accept the obligation of my posit to reflect a change in the registered colified in writing of this change.	is of title
Karen	\$	August 15, 2	019
Signa	ture of Registered Agent	Date	
If signing on beh	alf of an entity:		
	n behalf of InCorp Services,	Inc.	
	* * * PILI	NG FEE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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