FOSOCOSTI

(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:					
Office Line Only					



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10/17/17--01038--019 **35.00

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SECURING PERSONS

TPChe₃ GCT 1⁹ 2017



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Marissa Rather-lopez marissa.pitts@cscglobal.com

Date: October 13, 2017

Order#: 850387-024

Re: PLEIC, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

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: Marissa Rather-lopez c/o Corporation Service Company 251 Little Falls Drive 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 cha	provisions of sections 607.0502 inge is submitted for a corporat r to change its registered office	ion organized under the la	ws of the State of	GA	
1. The name of t	he corporation: PLEIC, INC.				
2. The principal	office address: 1165 Northchas	se Parkway, Suite 100, Ma	arietta, GA 30067		
3. The mailing a	ddress (if different):				
4. Date of incorp	poration/qualification: 12/29/20	Document	number: F050000	007574	
	I street address of the current re timent of State: (If resigned, ent		ed office on file w	ith the	
	NRAI Services, Inc				
1200 South Pine Island Road					
	Plantation	FL	33324	17 C	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered officer			選載して	
	Corporation Service Company	/	 -		
	1201 Hays Street	0 b - M0F H	.	2	
	Tallahassee	O Box NOT acceptable FL	32301	-	
as changed will					
Such change was authorized by th	s authorized by resolution dul- ie board, or the corporation has	y adopted by its board of c s been notified in writing o	directors or by an of the change.	officer so	
Jie E. Cienie		Jill Cilmi		Vice President	
I hereby accept I further agree to performance of agent. Or, if this hereby confirm	te of an officer or director the appointment as registered to comply with the provisions of my duties, and I am familiar w is document is being filed mere that the corporation has been to Service Company	agent and agree to act in if all statutes relative to th ith and accept the obligat ly to reflect a change in the	ne proper and com tion of my position he registered offic	aplete n as registered	
Ву:	are Tokuble	10/13/2017	Date		
_	half of an entity:		Date		
	Asst. Vice President				
	ped 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 * * *