F06000001049

(Re	equestor's Name)		
(Address)			
(Ac	ldress)		
(Ci	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	usiness Entity Nar	ne)	
· (Document Number)			
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OCT 3 1 2018

I ALBRITTON



CSC - WILMINGTON
251 Little Falls Drive
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 22, 2018

Order#: 434491-275

Re: DST TECHNOLOGIES, 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 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 ch	ange is submitted for a corporation	organized under the laws of the State of Missouri registered agent, or both, in the State of Florida.
	the corporation: DST TECHNOLO	
		Street, 5th Floor Kansas City, MO 64105
3. The mailing	address (if different):	
4. Date of incor	rporation/qualification: 02/16/2006	Document number: F06000001049
	d street address of the current regist urtment of State: (If resigned, enter r	ered agent and registered office on file with the esigned)
	C T Corporation System	
	1200 South Pine Island Road	
	Plantation	FL 33324
6. The name an (if changed):		ered agent and registered office on file with the esigned) FL 33324 d agent (if changed) and /or registered office
	Corporation Service Company	
	1201 Hays Street	
	P.O. Bo	N NOT acceptable
	Tallahassee	FL 32301
The street addr as changed will	ess of its registered office and the s	street address of the business office of its registered agent,
Such change w authorized by the	as authorized by resolution duly ad he board, or the corporation has be	opted by its board of directors or by an officer so en notified in writing of the change.
Xel	2 agrie	Jill Cilmi, Vice President
	ure of an officer or director	Printed or typed name and title
lyuther agree performance of agent. Or, if th hereby confirm	to comply with the provisions of all fmv duties, and I am familiar with	nt and agree to act in this capacity. I statutes relative to the proper and complete and accept the obligation of my position as registered o reflect a change in the registered office address, I fied in writing of this change.
By:	umkey	10/22/2018
Sig	mature of Registered Agent	Date
If signing on be	chalf of an entity:	
Ami M. Casper	, Asst. Vice President	
T	vped or Printed Name	

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