## FD6 000005340

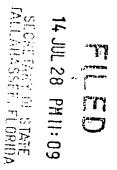
(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Cooming Markey					
(Document Number)					
Certified Copies Certificates of Status					
Operation to Filtre Office					
Special Instructions to Filing Officer:					

Office Use Only



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87/28/14--01060--006 \*\*35.00



C.M. 8-12-14



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ben Beaver bbeaver@cscinfo.com

Date: July 24, 2014

Order#: 218691-003

Re: SCS AGENCY, 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: Ben Beaver

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 cha	provisions of sections 607.0502, 617.0 nge is submitted for a corporation org r to change its registered office or reg	anized under the la	ws of the State of	NY	_
1. The name of t	he corporation: SCS AGENCY; INC.		<u> </u>		
2. The principal	office address:	021			
3. The mailing a	ddress (if different):				
4. Date of incorp	poration/qualification: 08/14/2006	Document	number: F06000	005340	
	street address of the current registered tment of State: (If resigned, enter resigned,	_	ed office on file w	vith the	
	REGISTERED AGENT SOLUTIONS	, INC.			
	155 OFFICE PLAZA DR., Suite A			TALL SEC	****
	TALLAHASEE	FL	32301	JUL 28	Same and the same
6. The name and street address of the new registered agent (if changed) and /or registered office a (if changed):					
	Corporation Service Company			PHII: 09	
	1201 Hays Street			<b>&gt;</b>	
		OT acceptable	00004		
	Tallahassee	FL	32301	-	
The street addre	ss of its registered office and the stree be identical.	et address of the bu	siness office of i	ts registered age	ent,
Such change wa authorized by th	s authorized by resolution duly adopt the board, or the corporation has been in	ed by its board of contified in writing of	lirectors or by an of the change.	officer so	
		Dona Priebe, V	ice President		
ign	officer of cirector	Printe	d or typed name and ti	Це	-
I further agree to performance of agent. Or, if this hereby confirm to	the appointment as registered agent of comply with the provisions of all stand and the provisions of all stand and the stand and the stand and the stand are stand as the corporation has been notified and Service Company	atutes relative to th I accept the obligat	e proper and con ion of my position	n as registered	
By: X	see Lokuble	07/22/2014			_
Sign	nature of Registered Agent		Date		_
If signing on bel	half of an entity:				
Grace E. Kirby,	Assistant Vice President	•			
Ty	ped or Printed Name				

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