F090000 1214

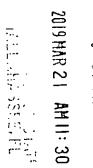
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

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C. GOLDEN MAR 3 0 2019



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Anthony Arthur anthony.arthur@cscglobal.com

Date: March 19, 2019

Order#: 647611-012

Re: GUIDESTONE AGENCY SERVICES

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: Anthony Arthur 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	ange is submitted for a corporat	2, 617.0502, 607.1508, or 617.1508. Florida tion organized under the laws of the State of vor registered agent, or both, in the State of	TX	-
 The name of The principal 	the corporation: GUIDESTONE office address: 5005 LBJ FREI	AGENCY SERVICES, INC. EWAY, STE 2200, DALLAS, TX 75244-615	2	
4. Date of incor	poration/qualification: 03/20/2	009 Document number: F09000	001214	
	d street address of the current rentment of State: (If resigned, en	egistered agent and registered office on file water resigned)	vith the	
	CAPITOL CORPORATE SEF	RVICES, INC.		
	515 EAST PARK AVENUE, 2	ND FL	2019	
	TALLAHASSEE, FL 32301		2019 HAR 2	<u> </u>
6. The name an (if changed):	d street address of the new regis	stered agent (if changed) and /or registered or	7· · · —	
	Corporation Service Compan	у	30	
	1201 Hays Street	O Box NOT acceptable	-	
	Tallahassee	FL 32301	_	
The street addr	ess of its registered office and libe identical.	the street address of the business office of i	ts registered age	nt,
Such change w authorized by t	as authorized by resolution dul he board, or the corporation ha	y adopted by its board of directors or by an s been notified in writing of the change.	officer so	
<u>Xi</u>	re E. CiQui	Jill Cilmi, Vice President		_
I hereby accept I further agree performance of agent. Or, if the hereby confirm	to comply with the provisions of fmy duties, and I am familiar v ais document is being filed mero	Printed of typed name and to agent and agree to act in this capacity, of all statutes relative to the proper and con with and accept the obligation of my positio, ely to reflect a change in the registered offic notified in writing of this change.	mplete n as registered	
By: Drg	gnature of Registered Agent	03/15/2019		-
	ehalf of an entity;	Duc		
Grace E. Kirby	, Assistant Vice President			
-	Funed or Printed Name			

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