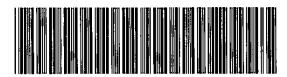


(Requ	estor's Name)	 -
(Addre	ess)	
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(Cityl)	State/Zip/Phon	9 #N
(City/C	State/Zip/Filon	<i>σπ</i>)
PICK-UP	WAIT	MAIL
	_	
(Busin	ness Entity Na	me)
(Docu	ment Number)
Certified Copies	Certificate	s of Status
Special Instructions to Fil	ing Officer:	

Office Use Only



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Man.



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscglobal.com

Date: December 14, 2016

Order#: 382163-006

Re: TECH MAHINDRA 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: Janis M. Smith 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 che	ange is submitted for a corpora	2, 617.0502, 607.1508, or 617.1508, Florida Statutes, this tion organized under the laws of the State of Delaware
		e or registered agent, or both, in the State of Florida.
1. The name of	the corporation: Tech Mahindra	a Technologies Inc.
2. The principal	office address: 1001 Durham	Avenue, Suite 101, South Plainfield, NJ 07080
3. The mailing a	address (if different): 15925 Ca	rmenita Road, Cerritos, CA 90703
4. Date of incor	poration/qualification: 06/08/2	Document number: F09000002298
	d street address of the current re rtment of State: (If resigned, en	egistered agent and registered office on file with the ter resigned) vices, LLC FL 32301 Stered agent (if changed) and /or registered office
	Registered Agents Legal Ser	vices, LLC 完
	155 Office Plaza Dr., Suite A	ASS TO LE
	Tallahassee	FL 32301
6. The name and (if changed):	d street address of the new regis	stered agent (if changed) and /or registered office
	Corporation Service Compan	<u>y</u>
	1201 Hays Street	
		O Box NOT acceptable
	Tallahassee	FL 32301
The street addr	ess of its registered office and i be identical.	the street address of the business office of its registered agent,
Such change wathorized by t	as authorized by resolution du he board, or the corporation ha	ly adopted by its board of directors or by an officer so is been notified in writing of the change.
σ	26 >-	Dona Priebe, Vice President
Signate	ure of an officer or director	Printed or typed name and title
I further agree performance of agent. Or, if th hereby confirm	to comply with the provisions fmv duties, and I am familiar v	l agent and agree to act in this capacity. of all statutes relative to the proper and complete with and accept the obligation of my position as registered ely to reflect a change in the registered office address, I notified in writing of this change.
By: <u> </u>	ace Cotuble	12/08/2016
Sig	gnature of Registered Agent \	Date
If signing on be	ehalf of an entity:	
	, Assistant Vice President	
Т	Typed or Printed Name	

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