

F10000002043

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

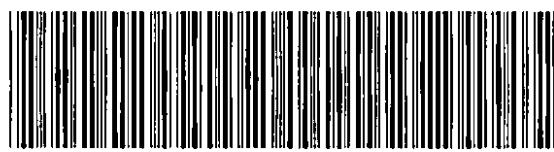
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2022 APR -6 AM 10:07

CLERK'S OFFICE OF STATE
MALLAHASSEE, FL

2022 APR -6 AM 11:27

R. A. Riches

APR 07 2022

ALBRITTON

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 590588 8375164

AUTHORIZATION

COST LIMIT : \$35.00

ORDER DATE : April 5, 2022

ORDER TIME : 4:36 PM

ORDER NO. : 590588-038

CUSTOMER NO: 8375164

CHANGE OF AGENT

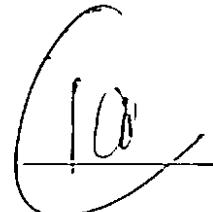
NAME: PAYLOCITY CORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Elyiena Baker

EXAMINER'S INITIALS:



**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of IL _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: PAYLOCITY CORPORATION
2. The principal office address: 1400 American Ln Schaumburg, IL 60173

3. The mailing address (if different): _____
4. Date of incorporation/qualification: 04/29/2010 Document number: F10000002043
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

C T CORPORATION SYSTEM

615 CRESCENT EXECUTIVE COURT TOWER 2, 3RD FL

LAKE MARY FL 32746

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company

1201 Hays Street

P.O. Box NOT acceptable

Tallahassee

FL 32301

FLORIDA DEPARTMENT OF
TALLAHASSEE, FL

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

AS: JILL CILMI

Signature of an officer or director

JILL CILMI

VICE PRESIDENT

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Corporation Service Company

Grace E. Kirby

Signature of Registered Agent

04/05/2022

Date

If signing on behalf of an entity:

GRACE E. KIRBY, ASST. VICE PRESIDENT

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE

MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)