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Division of Corporations

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

statement of char	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this age is submitted for a corporation organized under the laws of the State of Georgia to change its registered office or registered agent, or both, in the State of Florida.
	to enange, as registered office or registered agent, or conti, in the state of Prortad. the corporation: LPS USA, INC.
	office address: 233 Peachtree Street NE Harris Tower - Suite 2600 ATLANTA, GA 30303
	Attention: Legal Department c/o Impark, Suite 300 idress (if different): <u>601 West Cordova Street, Vancouver, British Columbia V6B 1G1 CA</u>
4. Date of incorp	oration/qualification: 12/27/2010 Document number: F10000005665
	street address of the current registered agent and registered office on file with the ment of State: (If resigned, enter resigned)
	NRAI SERVICES, INC 1200 South Pine Island Road Plantation, FL 33324
	. 20
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office CT Corporation System
	C.T. Corporation System
	1200 South Pine Island Road
	P.O. Box NOT acceptable
	Plantation, Florida 33324
The street address changed will	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.
Jillian	Hunt, Corporate Secretary Printed or typed name and title
I hereby accept to I further agree to of my duties, and document is being corporation fus CT/Constitution	the appointment as registered agent and agree to act in this capacity. The appointment as registered agent and agree to act in this capacity. The complete performance of all statutes relative to the proper and complete performance of a lam familiar with and accept the obligation of my position as registered agent. Or, if this is gifted merely to reflect a change in the registered office address. I hereby confirm that the been notified in writing of this change.
11/1/	07/30/2020
<i>Y</i>	nalf of an entity:
	Asst Secretary ped 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)