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| (Re | questor's Name) | |
|-------------------------|-------------------|-------------|
| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | y/State/Zip/Phone | e #) |
| | WAIT | |
| (Bu | siness Entity Nar | me) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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3 SECRE TARY OF STATE
ALLAHASSEE, FLORING

RAIROCHS

APR 10 2017 I ALBRITTON



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglboal.com

Date: April 5, 2017

Order#: 574520-009

Re: CONTEGO INVESTIGATIVE SERVICES, 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: Ami Casper

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, ange is submitted for a corporati er to change its registered office | ion organizea | under the la | ws of the Stat | te of DE | _ |
|---|--|-------------------------------|--|----------------------------------|--------------------------------|---|
| 1. The name of | the corporation: CONTEGO IN | VESTIGATIV | E SERVICE | S, INC. | | |
| • • | office address: DLAS BLVD SUITE 1650 FT LA | UDERDALE | FL 33301 | | | <u>, , , , , , , , , , , , , , , , , , , </u> |
| 3. The mailing a | address (if different): | | | | | |
| 4. Date of incor | poration/qualification: 10/04/20 | 12 | _ Document | number: F12 | 2000004085 | |
| | I street address of the current regrement of State: (If resigned, enter | | and register | ed office on f | ile with the | |
| | CORPORATE CREATIONS N | IETWORK, IN | IC. | | | |
| | 11380 PROSPERITY FARMS ROAD #221E | | | | | |
| | PALM BEACH GARDENS | | FL | 33410 | | |
| 6. The name and (if changed): | street address of the new regist | ered agent (if | changed) an | d /or registere | 0017 APR -7 SECRETARN ALLEMASS | 7 |
| | Corporation Service Company | | | | 143 m | |
| | 1201 Hays Street | | | | AM IO: OF STA | |
| | Tallahassee |). Box NOT accep | table FL | 32301 | 710A | |
| The street addre | ess of its registered office and the be identical. | ne street addr | ess of the bu | siness office | of its registered age | nt, |
| () | s authorized by resolution duly the board, or the corporation has | adopted by i been notified | ts board of d l in writing o | lirectors or by of the change | y an officer so | |
| | re of an officer or director | Jill | Cilmi, Vice F | | | _ |
| I hereby accept I further agree t performance of agent. Or, if thi hereby confirm | the appointment as registered a comply with the provisions of my duties, and I am familiar with a document is being filed merel that the corporation has been in Service Company | fall statutes i | ree to act in relative to th t the obligat | e proper and | complete | |
| By: J | nature of Registered Agent | 04 | /05/2017 | Date | 100-100-10 | _ |
| | half of an entity: | ` | | * | | |
| Grace E. Kirby | | | | | | |
| Ту | ped or Printed Name | _ | | | | |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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