

F13000003848

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 SEP 28 PM 2:02

OCT 1 2015

C LEWIS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MaxPoint Interactive, Inc.

Name of Corporation

DOCUMENT NUMBER: F13000003848

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MILTON VONG

Name of Contact Person

PARACORP INCORPORATED

Firm/Company

2804 GATEWAY OAKS DR #200

Address

SACRAMENTO, CA 95833

City/State and Zip Code

Renay.Ceasar@maxpoint.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MILTON VONG

Name of Contact Person

at (888) 886-7166

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**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 Delaware in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: MaxPoint Interactive, Inc.
2. The principal office address: 3020 Carrington Mill Blvd, Suite 300, Morrisville, NC 27560

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 9/9/2013 Document number: F12000003848

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)

Incorporation Services, LTD.

1540 Glenway Drive

Tallahassee, FL 32301

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

Paracorp Incorporated

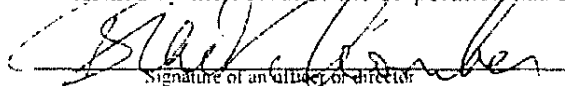
155 Office Plaza Drive, 1st Floor

P.O. Box NOT acceptable

Tallahassee, FL 32301

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.


Signature of an officer or director

Brad Schomber, CFO

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.



Signature of Registered Agent

09/25/2015

Date

If signing on behalf of an entity:

SHARON COOKE, ASSISTANT SECRETARY

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 (03/12)

15 SEP 28 PM 2:02

SECRETARY OF STATE
DIVISION OF CORPORATIONS

2804 Gateway Oaks Drive #200 Sacramento, CA 95833

Phone (800)533-7272 Fax (800)603-5868

REFERENCE # MUST BE ON INVOICE TO BE PAID

NUMBER PAGES:

Date: September 25, 2015

AE: Milton Vong

TO: Florida Department of State

H1080

REFERENCE: 916857

PO Box 6327

Tallahassee, FL 32314

FAX:

PLEASE PERFORM THE FOLLOWING:

MAXPOINT INTERACTIVE, INC.

Change of Registered Agent

IN: FL

SPECIAL INSTRUCTIONS:

PLEASE RETURN: Email

PLEASE CALL (800)533-7272 ATTN: Milton Vong TO CONFIRM FILING RESULTS

RETURN TO: PARASEC - 2804 GATEWAY OAKS DRIVE #200 SACRAMENTO, CA 95833

CALL IMMEDIATELY IF YOU HAVE ANY QUESTIONS OR THE DEADLINE WILL NOT BE MET
(800)533-7272