F14000003415

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



000392528120

RAGRO Change

2022 AUG 11 AM 9:39

2022 AUG 11 AM 11: 19

A. RAMSEY AUG 12 2022 CORPORATION SERVICE COMPANY

1201 Hays Street
Tallhassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : 12000000195					
REFERENCE : 873731 8106701					
AUTHORIZATION: Syncholic man					
COST LIMIT : \$ 35.00					
ORDER DATE : August 9, 2022					
ORDER TIME : 8:05 AM					
ORDER NO. : 873731-008					
CUSTOMER NO: 8106701					
~~ ~~~~					
CHANGE OF AGENT					
NAME: PAYFLEX SYSTEMS USA, INC.					
MAND. FAILDEN STOTENS OSA, INC.					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY					
CONTACT PERSON: Alexxis Weiland					
EXAMINER'S INITIALS:					

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

statement of cha	nge is submitted for a corporation	7.0502, 607.1508, or 617.1508, Flor organized under the laws of the State registered agent, or both, in the State	of NE
1. The name of t	he corporation: PAYFLEX SYSTE	MS USA, INC.	
2. The principal	office address: 11819 Miami St. O	maha, NE 68164	
3. The mailing a	ddress (if different):		
4. Date of incorp	oration/qualification: 08/11/2014	Document number: F14	000003415
	street address of the current regist tment of State: (If resigned, enter r	ered agent and registered office on filesigned)	
	C T CORPORATION SYSTEM		
	1200 SOUTH PINE ISLAND RO	AD	PROPERTY OF THE PARTY OF THE PA
	PLANTATION	FL 33324	
6. The name and (if changed):	street address of the new registere	d agent (if changed) and /or registere	ې ب d office
	Corporation Service Company		
	1201 Hays Street		
		PO Box NOT acceptable	
	Tallahassee	FL 32301	<u></u>
The street addre as changed will	ss of its registered office and the s be identical.	street address of the business office	of its registered agent.
Such change wa authorized by th	s authorized by resolution duly ac e board, or the corporation has be	dopted by its board of directors or by en notified in writing of the change	y an officer so
Ke	bey Chu	Kelsey Chin	Asst. Secretary
Signatur	e of an officer or director	Printed or typed name	and title
l further agrée t of my duties, and document is beir corporation has	the appointment as registered age o comply with the provisions of a d I am familiar with and accept th ig filed merely to reflect a change been notified in writing of this ch i Service Company	ent and agree to act in this capacity, ll statutes relative to the proper and the obligation of my position as regise in the registered office address. I hange.	complete performance tered agent. Or, if this tereby confirm that the
By: I had	ica Yekubi	08/05/2022	
	nature of Registered Agent	Date	
If signing on bel	nalf of an entity:		
Grace E. Kirby, A	Asst. Vice President		
Ту	ped or Printed Name		

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