F14000005236

(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



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DEC 1 9 2016

C LEWIS



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscglobal.com

Date: December 14, 2016

Order#: 398060-038

Re: NETFORTRIS OPERATING CO., INC.

Enclosed please find:

XX Change of Registered Agent and Office.

 \overline{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: Janis M. Smith 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

		.0502, 607.1508, or 617.1508, Florida Statutes	
		rganized under the laws of the State of Delawa	
	5 2	gistered agent, or both, in the State of Florida.	
1. The name of	the corporation: NetFortris Operatin	g Co., Inc.	
2. The principa	l office address: 455 Market Street, S	Suite 620, San Francisco, CA 94105	
• •			
3. The mailing	address (if different): PO Box 72012	8, Oklahoma City, OK 73172	
4. Date of incor	poration/qualification: 12/10/2014	Document number: F14000005236	
	d street address of the current register artment of State: (If resigned, enter res	red agent and registered office on file with the signed)	
	C T Corporation System		
	1200 South Pine Island Road		22
	Plantation	FL 33324	Wision
6. The name an (if changed):	-	agent (if changed) and /or registered office	2018 DEC 16 AM 9: 2
	Corporation Service Company		3
	1201 Hays Street		به ج <u>ب</u> زه
	P.O. Box	NOT acceptable	
	Tallahassee	FL 32301	
The street addr as changed wil	ress of its registered office and the st I be identical.	reet address of the business office of its regist	ered agent,
Such change wauthorized by t	vas authorized by resolution duly add the board, or the corporation has bee	pted by its board of directors or by an officer n notified in writing of the change.	so
Du	as huker	Bryan Koehler, CFO	
	ure of an officer or director	Printed or typed name and title	
I further agree performance o agent. Or, if the hereby confirm	f my duties, and I am familiar with a	statutes relative to the proper and complete nd accept the obligation of my position as reg reflect a change in the registered office addre	istered ess, I
	ace Z-Kuble	12/07/2016	
	gnature of Registered Agent \	Date	
	ehalf of an entity:		
	, Assistant Vice President		
	Typed or Printed Name		
	* * * FILINC	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)