# loridalDepartment of State

## Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA0000000023 Phone : (954)208-0845 Fax Number : (614)573-3996

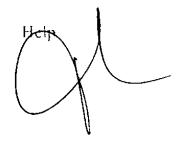
\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

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### COR AMND/RESTATE/CORRECT OR O/D RESIGN KIGO, INC.

Certificate of Status	0
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Electronic Filing Menu Corporate Filing Menu



#### PROFIT CORPORATION

# APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOI AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607-1504, F.S.)

#### SECTION I (1-3 MUST BE COMPLETED)

F15000000	0780	
(	Document number of corporation (if known)	
KIGO, INC		
(Name of corpora	ation as it appears on the records of the Departm	ent of State)
DE	02/24/2015	
(Incorporated under laws)	of) (Date authoriz	ed to do business in Florida)
(4-7 COM	SECTION II MPLETE ONLY THE APPLICABLE CHANG	
If the amendment changes the name of the corporation RealPage DEF, Inc.	poration, when was the change effected under the	e laws of its jurisdiction of
		<b>2</b> 0
not contained in new name of the corporation)		JAN
(If new name is unavailable in Florida, enter al	Iternate corporate name adopted for the purpose of	
<ol> <li>If the amendment changes the period of d</li> </ol>	luration, indicate new period of duration	AM 8: 45 SSEE, FL
	(New duration)	— 「
7. If the amendment changes the jurisdiction	n of incorporation, indicate new jurisdiction	
	(New jurisdiction)	<del></del>
If amending the registered agent and/or registered agent and/or the new register	gistered office address in Florida, enter the na ered office address:	me of the
	(Florida street address)	
New Registered Office Address	(City)	, Florida
		. rap s. com r
New Registered Agent's Signature, if chang I hereby accept the appointment as registered	ging Registered Agent: Tagent. I am familiar with and accept the obliga	ntions of the position.
Signature of New Registered	d Agent, if changing	

9. If the amendment changes person, title or capacity in accordance with 607 1504 (4), indicate that change, Address Type of Action Title/ Capacity Name AddRemove Add**L**.Remove I\_Remove Add1 Remove Attached is a certificate or document of similar import, evidencing the antendment, authenticated not more than 90 days prior to deligof the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdic under the laws of which it is incorporated. DocuSigned by. David Monk

FILING FEE \$35.00

(Signature of a director, president or other officer - if in the liands of a receiver or other court appointed fiduciary, by that fiduciary)

Vice President, Secretary and Chief Legal Officer

(Title of person signing)

Date 1/25 2023

David Monk

(Typed or printed name of person signing)



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE SAID 'KIGO, INC.', FILED A

CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO 'REALPAGE DEF,

INC.' ON THE NINTH DAY OF NOVEMBER, A.D. 2022, AT 9:03 O'CLOCK

A.M.



Authentication: 202587457

Jeffrey W. Bullock, Secretary of State

Date: 01-26-23

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