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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: January 31, 2018

Order#: 045106-003

Re: PASSPORT LABS 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

251 Little Falls Drive 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.

OUCA.XCOA

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

•	provisions of sections 607.0502, 617.050 inge is submitted for a corporation organ		
•	r to change its registered office or regist	•	
1. The name of t	the corporation: PASSPORT LABS, INC	.	
2. The principal	office address: 128 S. Tryon Street, Sui	ite 2200, Charlotte, NC 28202	
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 03/09/2016	Document number: F16000	0001150
	I street address of the current registered a tment of State: (If resigned, enter resigne		vith the
	NRAI Services, Inc.		
	1200 South Pine Island Road		2018
	Plantation	FL 33324	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):			
	Corporation Service Company		_ ့်
	1201 Hays Street		. 00
	P.O. Box NOT	·	
	Tallahassee	FL 32301	. !
The street addre as changed will	ss of its registered office and the street abe identical.	address of the business office of i	ts registered agent.
Such change wa author zey by th	s authorized by resolution duly adopted to board, or the corporation has been not	by its board of directors or by an tified in writing of the change.	officer so
Xie	2. aoni	Jill Cilmi, Vice President	
Signatui	re of an officer or director	Printed or typed name and ti	tle
I further agree to performance of agent. Or, if this hereby confirm to the confirmation to the c	the appointment as registered agent and o comply with the provisions of all statumy duties, and I am familiar with and a statum to reflect the corporation has been notified in Service Company	ites relative to the proper and cor	n ne ragietaradi
By: Cer	mel	01/31/2018	
Sign	valure of Registered Agent	Date	
If signing on bel	nalf of an entity:		
Ami M. Casper,	Asst. Vice President		
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 * * *