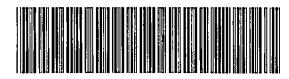
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(Requestor's Name)					
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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Grace Kirby grace.kirby@cscglobal.com

Date: February 28, 2018

Order#: 087326-011

Re: VERIFLY INSURANCE SERVICES, 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: Grace Kirby

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

statement of cha	provisions of sections 607.0302 ange is submitted for a corporat er to change its registered office	ion organized under the la	aws of the Sta	te of NY	·	
1. The name of	the corporation: VERIFLY INSU	RANCE SERVICES, INC	). 			
	office address:h Street NY NY 10014			·		
3. The mailing a	address (if different):					
1. Date of incorporation/qualification: 04/19/2016 Document number				F16000001823		
	d street address of the current represent of State: (If resigned, entited)		red office on f	ile with t	the	
	NRAI Services, Inc.					
	1200 South Pine Island Road					
	Plantation	FL	33324			
6. The name and (if changed):	d street address of the new regist	ered agent (if changed) at	nd /or register			
	Corporation Service Company	,	LA	2010 M		
	1201 Hays Street		ASS	HAR -		
		) Box NOT acceptable	<u> </u>	<del>₹</del> ∾	יו רדים	
	Tallahassee	FL	32301	ע בּ	E	
The street addre	ess of its registered office and the identical.	ne street address of the bi	ي usiness off <del>fee</del> ح.		gistered agent.	
Such change was authorized by th	as authorized by resolution duly ne board, or the corporation has	adopted by its board of been notified in writing	directors or b of the change	y an offi ·	cer so	
<u> </u>	e E. Whee		Jill Cilmi, Vice President			
I hereb: accept I further agree to performance of agent. Or, if thi hereby confirm:	the appointment as registered a to comply with the provisions of my duties, and I am familiar with the cocument is being filed mere, that the corporation has been responsively.	agent and agree to act in fall statutes relative to th ith and accept the obligate by to reflect a change in t	he proper and tion of my pos he registered	l comple: sition as	te registered Idress, I	
By: Ilrac	<u> </u>	02/28/2018	<del></del>			
Sign	nature of Registered AgenN		Date			
If signing on bel	half of an entity:					
	Assistant Vice President	_				
Τv	oped or Printed Name					

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