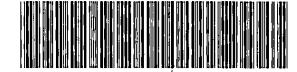


(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Document Number)		
Certified Copies	_ Certificates	s of Status
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AUG 04 2017

R. WHITE

## **COVER LETTER**

Division of Corporations	
SUBJECT: National Payroll Management C	ompany
N	ame of Corporation
DOCUMENT NUMBER: F9300000031	4
The enclosed Amendment and fee are s	ubmitted for filing.
Please return all correspondence concer	ming this matter to the following:
Legal Department - Attn: Felicia Sias	
Name of Contact Person	1
Pillar Income Asset Management	1
Firm/Company	<u>'</u>
1603 LBJ Freeway, Suite 800	
Address	
Dallas, Texas 75234	
City/State and Zip Coo	le .
legal.department@pillarincome.com	ı
E-mail address: (to be used for future	annual report notification)
For further information concerning this	matter, please call:
Felicia Sias	at ( 522-4307
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following ar	nount:
X \$35.00 Filing Fee \$43.75 Filing Certificate of	Status  Certificate of Status & Certified Copy (Additional copy is enclosed)  (Additional copy is enclosed)
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



July 24, 2017

LEGAL DEPARTMENT-ATTN: FELICIA SIAS 1603 LBJ FREEWAY, SUITE 800 DALLAS, TX 75234

SUBJECT: NATIONAL PAYROLL MANAGEMENT COMPANY

Ref. Number: F93000000314

We have received your document for NATIONAL PAYROLL MANAGEMENT COMPANY and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number five of the application.

The document number of the name conflict is L05000040970-BARRINGTON SERVICES LLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II

Letter Number: 117A00014887

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

(Pursuant to s. 607.1504, F.S.)

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

F93000000314

(Document number	r of corporation (if known)	
National Payroll Management Company		
(Name of corporation as it appears	on the records of the Department of State)	
2. Nevada	3. January 25, 1993	
(Incorporated under laws of)	3. January 25, 1993 (Date authorized to do business in Florida)	a)
SEC (4-7 COMPLETE ONLY	CTION II THE APPLICABLE CHANGES)	
4. If the amendment changes the name of the corporation its jurisdiction of incorporation? July 3, 2017	on, when was the change effected under the laws	of
5. Barrington Services Corporation NV  (Name of corporation after the amendment, adding stappropriate abbreviation, if not contained in new na	ame of the corporation)	
(If new name is unavailable in Florida, enter alternate business in Florida)	corporate name adopted for the purpose of trans	acting
<ol><li>If the amendment changes the period of duration, ind</li></ol>	icate new period of duration.	17 . # . 3
(Nev	w duration)	•
7. If the amendment changes the jurisdiction of incorpor	ration, indicate new jurisdiction.	; ;
	jurisdiction)	1
<ol> <li>Attached is a certificate or document of similar important and policition to the Dep days prior to delivery of the application to the Dep having custody of corporate records in the jurisdiction</li> </ol>	rt, evidencing the amendment, authenticated not partment of State, by the Secretary of State or other under the laws of which it is incorporated.	more than er official
Man	na	
of a receiver or other court a	ident or other officer - if in the hands ppointed fiduciary, by that fiduciary)	
Louis J. Corna	Vice President	
(Typed or printed name of person signing)	(Title of person signing)	





## CERTIFICATE OF NAME CHANGE

I, Barbara K. Cegavske, the duly qualified and elected Nevada Secretary of State, do hereby certify that on July 3, 2017, a Certificate of Amendment to its Articles of Incorporation changing the name to BARRINGTON SERVICES CORPORATION, was filed in this office by NATIONAL PAYROLL MANAGEMENT COMPANY. Said change of name has been made in accordance with the laws of the State of Nevada and that said Certificate of Amendment is now on file and of record in this office.



Certified By: Jennifer Wilton Certificate Number: C20170711-0487 You may verify this certificate online at http://www.nvsos.gov/ IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on July 11, 2017.

Barbara K. Cegarste

Barbara K. Cegavske Secretary of State