

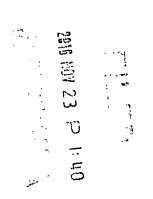
(Re	equestor's Name)			
(Ac	ddress)			
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(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	MAIT WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



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Who

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FIREIX



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Marissa Rather-lopez marissa.pitts@cscglobal.com

Date: November 21, 2016

Order#: 352275-041

Re: EGS CUSTOMER CARE, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

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: Marissa Rather-lopez 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



## ATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 6. inge is submitted for a corporation r to change its registered office or	organized under the laws of the S	tate of PA
1. The name of t	the corporation: EGS CUSTOMER	R CARE, INC.	
	office address:egan Road Suite 300 Bannockburr		
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 08/17/1998	Document number:	F98000004670
	I street address of the current regist tment of State: (If resigned, enter r		n file with the
	C T CORPORATION SYSTEM		
	1200 SOUTH PINE ISLAND ROA	AD .	in the state of th
	PLANTATION	FL 33324	
6. The name and (if changed):	I street address of the new registere		
	Corporation Service Company		
	1201 Hays Street		٠
		ox NOT acceptable	
	Tallahassee	FL 32301	
The street addre	ess of its registered office and the be identical.	street address of the business offi	ce of its registered agent,
Such change wa authorized by th	is authorized by resolution duly ac se board, or the corporation has be	dopted by its board of directors or een notified in writing of the chan	by an officer so ge.
من	e Canie	Jill Cilmi, Vice President	
I hereby accept I further agree to performance of agent. Or, if the hereby confirm Corporatio	the appointment as registered age to comply with the provisions of a my duties, and I am familiar with is document is being filed merely in the corporation has been not no Service Company	ll statutes relative to the proper a	ity. nd complete position as registered
By: \ Sign	nature of Registered Agent	Date	11. 11. 11. 11. 11. 11. 11. 11. 11. 11.
If signing on be	half of an entity:		
Grace E. Kirby,	Asst. Vice President		
Ty	ped or Printed Name		

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