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(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



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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: March 20, 2020

Order#: 227123-008

Re: CSG ADVISORS INCORPORATED

Enclosed please find:

XX Change of Registered Agent and Office.

 \overline{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

statement of cha	provisions of sections 607.0502, 6 inge is submitted for a corporation ir to change its registered office or	organized under the laws	of the State of Dela	ware	_
1. The name of i	the corporation: CSG ADVISORS	INCORPORATED	·		
2. The principal	office address: 41 Perimeter Cen	ter E, Suite 615, Atlanta, 0	GA 30346-1976		_
3. The mailing a	address (if different):				
4. Date of incorp	poration/qualification: 01/04/1999	Document nui	mber: <u>F9900000003</u>	30	
5. The name and	d street address of the current regis	tered agent and registered o			
	TRAC - The Registered Agent (Company			
236 E. 6th Avenue					
	Tallahassee	FL	32303	7020 i i v o 214	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):					
	Corporation Service Company				- i
	1201 Hays Street			VK 10: 00	
	P.O. Box NOT acceptable				
	Tallahassee	FL :	32301		
The street addre	ess of its registered office and the be identical.	street address of the busin	ness office of its regi	istered age	ent.
Such change was author(ze) by the	as authorized by resolution duly a he board, or the corporation has b	dopted by its board of direen notified in writing of	ectors or by an office the change.	er so	
Jill Cilmi, Vice President					
Sgratu	re of an officer or director	Printed	or typed name and title		_
I further agree of my duties, ar document is bei corporation has	the appointment as registered as to comply with the provisions of a large of this constituted of the constituted of	all statutes relative to the p he obligation of my positive te in the registered office of	proper and complete	performa nt. Or, if nfirm that	ince this the
ву:	er M Lei	03/20/2020			
Sig	gnature of Registered Agent		Date		_
If signing on be	chalf of an entity:				
Ami M. Casper,	Asst. Vice President				
	vped or Printed Name	-			

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