## F.99000004907

(Re	equestor's Name)			
(Ac	ldress)			
(Ac	ldress)			
(Ci	ty/State/Zip/Phone :	<del>(</del> *)		
PłCK-UP	☐ WAIT	MAIL		
(Bı	usiness Entity Name	<del></del>		
(Document Number)				
Certified Copies	Certificates o	of Status		
Special Instructions to Filing Officer:				
	· · · · · · · · · · · · · · · · · · ·			

Office Use Only



900275492959

07/31/15--01033--008 \*\*35.00

15 JUL 31 PH 2: 23

AUG - 4 2015



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscglobal.com

Date: July 23, 2015

Order#: 711505-027

Re: SIGMA GP HOLDING, 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: Janis M. Smith

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

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

statement of cha	nge is submitted for a corporation	517.0502, 607.1508, or 617.1508, Florida Statutes, n organized under the laws of the State of <u>NV</u> r registered agent, or both, in the State of Florida.	this	-
	the corporation: SIGMA GP HOLE			
	office address: Street, Santa Clara, CA 95050			
3. The mailing a	address (if different):			
4. Date of incorp	te of incorporation/qualification: 09/23/1999 Document number: F99000			
	d street address of the current registrement of State: (If resigned, enter	stered agent and registered office on file with the resigned)		
	C T CORPORATION SYSTEM			S S
	1200 SOUTH PINE ISLAND ROAD		5 JUL 31	E PRE
	PLANTATION	FL 33324	<u>ω</u>	338 T
6. The name and (if changed):	d street address of the new register	red agent (if changed) and /or registered office	PM 2: 2	ED ( OF STAT EE, FLORI
	Corporation Service Company		ယ	Dri >
	1201 Hays Street			
P.O. E Tallahassee		Box NOT acceptable  FL 32301		
The street address changed will	ess of its registered office and the be identical.	e street address of the business office of its registe	red age	ent,
Such change was authorized by the	as authorized by resolution duly a ne board, or the corporation has b	adopted by its board of directors or by an officer s been notified in writing of the change.	0	
	26 >	Dona Priebe, Vice President		_
I hereby accept I further agree performance of agent. Or, if th hereby confirm	to comply with the provisions of my duties, and I am familiar wit, is document is being filed merely that the corporation has been no	Printed or typed name and title  gent and agree to act in this capacity, all statutes relative to the proper and complete h and accept the obligation of my position as regi- to reflect a change in the registered office addre- tified in writing of this change.	stered ss, I	
By: Ath	on Service Company	07/20/2015		
	nature of Registered Agent	Date	•	-
If signing on be	chalf of an entity:			
Sylvia Queppet, Assistant Vice President		Dept. of	Stat	le
T	yped or Printed Name	JUL 27	2015	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)