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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	÷#)
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(Bu	siness Entity Nan	ne)
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AND THANSFEL FLORID

JUN 1 5 2016 Y SULKER



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: June 6, 2016

Order#: 146296/033

Re: BENEFITS IN A CARD, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Janis M. Smith c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605,0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

2. (a)	725 Lowndes Hill Road	(b)				
``	Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)		,	Mailing address of lin (Note: MAY BE F			
	Greenville, SC 29607		- 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0			-	
	01/23/2002		L020000	002260	**		
3.	Date of filing/registration in Florida	4.		Document numb	er		
5. (a)	AGM3 CORP						
J. ()	Registered Agent and Registered Office shown on the recor	rds of the Florida	Dept. of Sta	 ate:			
	FUSE FOLM, INC.						
	Registered Office Address MUST BE FLORIDA STR.	EET ADDRESS	 <u>L</u>				
	P.O. B OX 111						
	F.O. B OX 111			•••	$\mathbf{\Sigma}_{i_{i}}$		
	JACKSONVILLE	, FL <u>32256</u>				<u>ਨ</u>	
					(** **********************************	- NUL	
(b)	· · · · · · · · · · · · · · · · · · ·			_	IASSE	000	1
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regis</u>	itered Office add	ress:		は記れ		
						A	سنا 1
	1201 Hays Street			_	F STALL FLORID	<u>ප</u> ප	· San.
	NEW Registered Office Address:				IDA	ස	
	Tallabassa	00004					
	Tallahassee	, FL <u>32301</u>		_			
he chai igent w vas/we	mited liability company is not organized under the nge or changes are made, the Florida street addressill be identical. Or, in the case of a Florida limiter authorized by an affirmative vote of the membeles of organization or the operating agreement of	ss of the regist ed liability cor ers of the limi	ered offic npany, it ted liabili	ce and the business is hereby confirme ty company or as o	office of the d that the cha	registe inge(°`	red ,;
1	22 10020 Manager		Kevi	M W. Reese	,		
_	ire of a member or authorized representative of a member	•		Printed or typed nam	ne of signee	·	
I hereb provisió he obli o mere notified	y accept the appointment as registered agent and ons of all statutes relative to the proper and comp gations of my position as registered agent as pro ly reflect a change in the registered office addres in writing of this change.	l agree to act i plete performa vided for in Ci s, I hereby coi	in this cap nce of my hapter 60 nfirm that	pacity. I further ag duties, and I am fa 5, F.S. Or, if this a the limited liabilit	ree to compl miliar with a locument is b y company h	y with t and acc eing fil as been	he ept ed
	e of Registered Agent Corporation Service Compar						
Signature	of Registered Agent Company from Service Company	ny RV Gr	ace B. Ki	rhy Accietant Vi	ce President		

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

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Principal office address of lin (Note: MUST BE STR Greenville, SC 1/23/2002 Date of filing/registrat	29607		_	of limited liability company: BE POST OFFICE BOX)
1/23/2002 Date of filing/registrat)2000002260	
Date of filing/registrat	ion in Florida)2000002260	
	tion in Florida			
21/2 2222		4.	Document nu	ımber
GM3 CORP				
tered Agent and Registered Offi	ce shown on the records o	f the Florida Dep	t. of State:	
SE EOLM INC				
	CRE FLORIDA STREET	(ADDRESS)	<u> </u>	
		THE PROPERTY		
D. B OX 111				
CKSONVILLE	F	1 32256		
				15.
noration Service Company	1			16 16
····		d Office address:		JUN-8
				AS AS
1 Havs Street				SE 38
·				AMIO: 2
				AM IO: UF SIA FLOR
				35 G
				80 S
ıhassee	, F J	L 32301		
	SE FOLM, INC. Iered Office Address (MUS) O. B OX 111 CKSONVILLE Doration Service Company name of NEW Registered Agen 1 Hays Street Registered Office Address:	SE FOLM, INC. Iered Office Address	SE FOLM, INC. Iered Office Address (MUST BE FLORIDA STREET ADDRESS) O. B OX 111 CKSONVILLE , FL 32256 Doration Service Company name of NEW Registered Agent and/or NEW Registered Office address 1 Hays Street Registered Office Address: thassee , FL 32301 liability company is not organized under the laws of the State	SE FOLM, INC. Iered Office Address (MUST BE FLORIDA STREET ADDRESS) O. B OX 111 CKSONVILLE , FL 32256 Dorration Service Company name of NEW Registered Agent and/or NEW Registered Office address: 1 Hays Street Registered Office Address:

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