## MOU 000002068

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

Office Use Only



800356543938

12/21/20--01040--005 \*\*25.00



5. YOUNG



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: December 18, 2020

Order#: 522862-181

Re: VOYA INSTITUTIONAL PLAN SERVICES, 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 Please return evidence to the following:

Attn: Erika Zavala Daza 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.

QUCA.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.

(a)	ONE ORANGE WAY		(b) ONE ORANGE WAY				
("7".	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
(b)	WINDSOR, CT 06095		WINDSOR, CT 06095				
	10/04/2000		M0000002068				
	Date of filing/registration in Florida C T CORPORATION SYSTEM	4.	4. Document number				
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State  1200 SOUTH PINE ISLAND ROAD  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)						
	PLANTATION	33324		2620 DEC 2			. ,
	Enter name of NEW Registered Agent and/or NEW Registere Corporation Service Company	d Office :	iddress:	_	• •	7	4.4 4 , 4 , 4
	NEW Registered Office Address: 1201 Hays Street			_		7: 09	
	Tallahassee	32301					
ange ent w is/we e arti	mited liability company is not organized under the la or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited li are authorized by an affirmative vote of the members cles of organization or the operating agreement of the	registe ability of of the li limited	red office an company, it i mited liabilit liability con	nd the business is hereby confir ty company or a	office of the of the office of	ne registe he chang	ered e(s)
	nature of a member or authorized representative of a member				Printed or typed name of signee		
heret ovisie	by accept the appointment as registered agent and agons of all statutes relative to the proper and complete gations of my position as registered agent as provide by reflect a change in the registered office address. I	ree to ac perforn d for in	et in this cap nance of my Chapter 605	acity. I further duties, and I ar 5, F.S. Or, if th	r agree to c m familiar us docume	comply w with and nt is bein	rith th Lacco 1g file

Grace E. Kirby, Asst. Vice President of Corporation Service Comapny
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

**FILING FEE: \$25.00** 

18 (2/14)