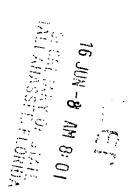
M04000002358

Office Use Only



700286437017

06/08/16--01013--002 **25.00





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#: 146296-008

Re: BENEFIT GUARANTY, 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: 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 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.

1.	Na	me of the limited liability company: BENEFIT GUA	RANTY, LLC		
2. 1	(a)	725 LOWNDES HILL ROAD	(b)		
,	(<i>)</i>	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of lim	nited liability company: OST OFFICE BOX)
		GREENVILLE, SC 29607			
		06/16/2004	M040000	002358	
3.		Date of filing/registration in Florida	4.	Document number	r
5.	(a)	BUSINESS FILINGS INCORPORATED		_	
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:					
		Registered Office Address (MUST BE FLORIDA STREET A	(DDRESS)		
		1200 SOUTH PINE ISLAND ROAD	 	_	
		PLANTATION , FL	33324		
				_	Agriculture (Control of Control o
(, -	Corporation Service Company			TO JUN
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u>	Office address:		
		1201 Hays Street			SS 6
		NEW Registered Office Address:		_	
					5: 69
				_	2
		Tallahassee , FL	32301		3
the cagen was/	han twi wer	mited liability company is not organized under the law- age or changes are made, the Florida street address of t ill be identical. Or, in the case of a Florida limited lial a authorized by an affirmative vote of the members of les of organization or the operating agreement of the l	the registered office bility company, it is the limited liabilit	e and the business of s hereby confirmed y company or as of	office of the registered I that the change(s) herwise provided in
		w Mono Manager	Keym		
_		re of a member or authorized representative of a member		Printed or typed name	-
I he prove the of notif	reby isio blig erel ied	y accept the appointment as registered agent and agre ns of all statutes relative to the proper and complete p gations of my position as registered agent as provided y reflect a change in the registered office address, I he in writing of this change			
Signature of Registered Agent Corporation Service Company BY: Grace E. Kirby, Assistant Vice Prsident					