MOQOOOD 4131

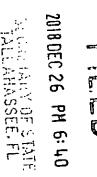
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
. PICK-UP WAIT MAIL					
· (Business Entity Name)					
(Document Number)					
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JAN - 9 Z019



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Anthony Arthur anthony.arthur@cscglobal.com

Date: December 21, 2018

Order#: 549674-065

Re: NIC 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: Anthony Arthur 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.

1. 1	Name of the limited liability company: NIC SERVICES	S, LLC_		
2. (a	25501 W VALLEY PARKWAY SUITE 300	(b)	25501 W VALLEY PARK	WAY SUITE 300
~ (-	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of lim	nited liability company: OST OFFICE BOX)
	OLATHE, KS 66061		OLATHE, KS 66061	
	10/16/2009		M09000004131	
3.	Date of filing/registration in Florida	4.	Document number	≥ r
5. (a	nRAI SERVICES, INC			
(b)	Registered Agent and Registered Office shown on the records of t	the Florida I	Dept. of State:	
	1200 SOUTH PINE ISLAND ROAD			
	Registered Office Address (MUST BE FLORIDA STREET A	ADDRESS)		_
				2018
	Plantation .FL	33324		FIII DEC 2
	·			NS SEE,
	Enter name of NEW Registered Agent and/or NEW Registered	Office addi	(ESS:	D 6:40
	1201 Hays Street			, •
	NEW Registered Office Address:			
	Tallahassee Fi.	32301		
the cl agent was/v	limited liability company is not organized under the law nange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia vere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	vs of the S the registability con f the limit	ered office and the business npany, it is hereby confirmed ted liability company or as o	office of the registered d that the change(s)
	Xie E. Cienie	Jill Ci	ilmi, Authorized Person	
_	nature of a thember or authorized representative of a member		Printed or typed nam	_
I her provi the oi to me notifi	eby accept the appointment as registered agent and agressions of all statutes relative to the proper and complete pligations of my position as registered agent as provided rely reflect a change in the registered office address, I held in writing of this change.	ee to act i performan d for in Ch iereby cor	n this capacity. I further ag nce of my duties, and I am fa napter 605, F.S. Or, if this a nfirm that the limited liabilit	ree to comply with the miliar with and accept locument is being filed y company has been
Signa	ture of Registered Agent Corporation Service Company	DV: 0	naa E. Viehr, Andistans VI	aa Desaidant
	····· ··························· COLDOPATION SERVICE COMPANY	DI. Uli	ACC E. NIIOV. ASSISIANI VI	ar mesioeni