# M16000006421

(Re	equestor's Name)	
(Ad	ldress)	
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(Cid	ty/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Na	me)
(Do	ocument Number	)
Certified Copies	_ Certificate	es of Status
Special Instructions to	Filing Officer:	

Office Use Only



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## CORPORATE ACCESS, \_

#### When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

#### WALK IN

		WALKIN
	PICK UP:	10-17-16
Á	CERTIFIED COPY	
\	CUS	Amend
1.	Broadridge Ma (CORPORATE NAME AND DOCUMENT #	iling Services, LLC
2.	(CORPORATE NAME AND DOCUMENT #	
<b>3. 4.</b>	(CORPORATE NAME AND DOCUMENT #	
<b>5.</b>	(CORPORATE NAME AND DOCUMENT #	<u> </u>
6.	(CORPORATE NAME AND DOCUMENT #	()
SPECIA	(CORPORATE NAME AND DOCUMENT #  L  CTIONS:	( <sup>1</sup> )

#### **COVER LETTER**

TO: Registration Section

Division of Corporations				
SUBJECT: BROADRIDGE MAIL Name of Foreign I				_
Dear Sir or Madam:				
The enclosed application, certificate and fee(s) are	submitted fo	r filing.		
Please return all correspondence concerning this r	natter to the fo	ollowing:		
Karen Ryan				
Name of Person				
Broadridge Financial Solutio	ns, Inc.			
2 Journal Square Plaza				Š. 2
Address				
Jersey City, NJ 07306				ALLAHASSE ELGRIGH
City/State and Zip Code				
Karen.Ryan@broadridge.cor	n			
E-mail address: (to be used for future annual re		on)		
For further information concerning this matter, pl		220 4	700	:12
	, 201	239-4		<del></del>
Name of Person	Area Code	& Daytime 1	Felephone Num	ber
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		Registration of P.O. Box	G ADDRESS: on Section of Corporations 6327 ee, Florida 3231	
Enclosed is a check for the following amount:  \$25 Filing Fee \$\times \text{S30 Filing Fee & Certificate of Status}\$\$\$\$\$CR2E055 (9/15)\$\$	\$55 Filin Certified		S60 Filing F Certificate Certified C	of Status &

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

#### SECTION I (1-4 must be completed)

State: BROADRIDGE MAILING	SERVICES, LLC			
Enter new principal office address, if applicable	e:			
(Principal office address MUST BE A STREET ADDRESS)				<del>-</del>
Enter new mailing address, if applicable: (Mailing address MAX BE A POST OFFICE BOX)		······································	nii ķ	2
2. The Florida document number of this limited	l liability company is: M160000	06421		zalis of i
3. Jurisdiction of its organization: DELAW	ARE		FSS	
4. Date authorized to do business in Florida:	08/11/2016		- T	_ _⊳
SECTION II (5-9 complete only the applicab	de changes)			==
5. New name of the limited liability company:	BROADRIDGE MAIL, LL	C	(E)-1	0 11
(n	nust contain "Limited Liability Com	pany, " "L.L.C.	," or "LLC	Ξ?")
(If name unavailable, enter alternate name adopt copy of the written consent of the managers or the must contain "Limited Liability Company," "L.	managing members adopting the alte	usiness in Floric ernate name. Th	da and attac ne alternate	h a name
<ol> <li>If amending the registered agent and/or regist registered agent and/or the new registered office</li> </ol>	tered officer address on our records, e address here:	enter the name	of the new	!
Name of New Registered Agent:				_
New Registered Office Address:		·		_
	Enter Florida	Street Address		
-	City	, Florida	Zip Code	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered a the provisions of all statutes relative to the propand accept the obligations of my position as reg	Registered Agent: Igent and agree to act in this capacit the and complete performance of my	ty. I further agr duties, and I a anter 605. F.S.	ee to comp m familiar Or. if this	with

tle/ Capacity	Name	Address	Type of Action
			Add
			Remove
	·····		Add
			Remove
			Adding 83
			Remove
			Remove
<del></del>			Add
			Remove

Filing Fee: \$25.00

Typed or printed name of signee

## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "BROADRIDGE MAIL, LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE TENTH DAY OF OCTOBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BROADRIDGE MAIL,"
LLC" WAS FORMED ON THE TWELFTH DAY OF MAY, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

Authentication: 203134002

Date: 10-10-16

4158319 8300 SR# 20166134889 <u>Delaware</u>

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT
COPY OF THE CERTIFICATE OF AMENDMENT OF "BROADRIDGE MAILING
SERVICES, LLC", CHANGING ITS NAME FROM "BROADRIDGE MAILING
SERVICES, LLC" TO "BROADRIDGE MAIL, LLC", FILED IN THIS OFFICE
ON THE SIXTH DAY OF OCTOBER, A.D. 2016, AT 3:52 O'CLOCK P.M.

Authentication: 203130627

Date: 10-07-16

State of Delaware
Secretary of State
Division of Corporations
Delivered 03:52 PM 10:06:2016
FILED 03:52 PM 10:06:2016
SR 20166103003 - File Number 4158319

### STATE OF DELAWARE CERTIFICATE OF AMENDMENT

Name of Limited Liability Company:	Broadridge Mailing	
Services, LLC		
	nited liability company is hereby amen	
as follows:		
The name of the limited hereby changed to:	liability company is	
mereby changed to:		
Broadridge	Mail, LLC.	
the day of	signed have executed this Certificate of the control of the contro	
By:	Calplut	
•	Authorized Person(s)	
Nar	nc: Adam D. Amsterdam	
	Print or Type	