

(Requestor's Name)					
(Address)					
(Address)					
(Cit	ty/State/Zip/Phone	#)			
PICK-UP	WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: August 2, 2017

Order#: 749151-005

Re: KEY MERCHANT 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: Ami Casper 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.

OUCA.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: KEY MERCHANT	r servi	CES, LLC	
7	(a)	2 Concourse Parkway NE, Suite 800	(b)	800 Nic	collet Mali
	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (5)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	BC-MN-H21O		1210		
		Atlanta G 30328		Minneapo	olis, MN 55402
		08/03/1998		M980000	00837
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	C T Corporation System			-
		Registered Agent and Registered Office shown on the records of the	e Florida I	Dept. of State	::
		1200 South Pine Island Road			
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
		0			
		Plantation FL		33324	
	/1 N				
	(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered Office address:			
				<u></u> -	7:
		1201 Hays Street			25
		NEW Registered Office Address:	<del></del>		> ·
		T 11 4			
		Tallahassee , FL_	32301		
the ag wa	ent w is/vye	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of the cless of organization or the operating agreement of the limited street.	ne regist fility con the limit	ered office npany, it is ed liability	e and the business office of the registered is hereby confirmed that the change(s) y company or as otherwise provided in
	>	Xee & GOME	Jill Ci	lmi, Autho	rized Person
:	Signat	ure of a member or authorized representative of a member			Printed or typed name of signee
pri the to	ovisie e obli mere	waccept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pe gations of my position as registered agent as provided j iv reflect a change in the registered office address. I he in writing of this chapgy.	e to act i erforma for in Cl reby cor	n this cape ice of my e iapter 605 ifirm that i	acity. I further agree to comply with the duties, and I am familiar with and accept, F.S. Or, if this document is being filed the limited liability company has been
Si	enalu.	e of Registered Agent Companying Society Companying	QV: ∧⊶	iM Con	por Acet Vice President
- , ,	F1341411	e of Registered Agent Corporation Service Company I	ot: An	n ivi. Casj	per, Asst. Vice President