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Certified Copies	Certificates	s of Status		
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Special Instructions to	Filing Officer:			
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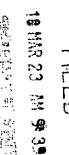
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Making Lives Better With Alorica

Name of Corporation

DOCUMENT NUMBER: N15000008116

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Natalie Wang

Name of Contact Person

MLBA

Firm/Company

5 Park Plaza, Suite 1100

Address

Irvine, CA 92614

City/State and Zip Code

Natalie.Wang@Alorica.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Natalie Wang

,949

527-4720

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statute ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida	3		
1. The name of	the corporation: Making Lives Better With Alorica, Inc.			
2. The principal	office address; 5 Park Plaza, Suite 1100, Irvine, CA 92614			
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: August 14th, 2015 Document number: N1500000	8116		
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)			
	Valerie McCutcheon	ad to a		
	8151 Peters Road, Suite 2000		e HAR	
	Plantation, FL 33324		ال ال	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office		EH 9	
	Elizabeth (Anne) Romagnino		∵	
	8151 Peters Road, Suite 2000			
	P.O. Box NOT acceptable Plantation, FL 33324			
The street addre	ess of its registered office and the street address of the business office of its registee identical.	tered a	gent,	
Such change was	as authorized by resolution duly adopted by its board of directors or by an officer no hoard, or the corporation has been notified in writing of the change.	so		
Signalu	Elizabeth Pan re of an officer or director Printed of typed name and title	<u>, T</u> F	<u>></u>	
Thereby accept I further agree formance of agent. Or, if thi hereby confirm	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered office adar that the registered office adar that the corporation has been notified in writing of this change.	zisterec ess, I	i	
Elizabeth Sigi	Anno Komagnin 3-16-18 Date	···· <u>-</u>		
f signing on bel	half of an entity:			
lizabeth	Anne Romagnino rped or Printed Name			

* * * FILING FEE: \$35.00 * * *