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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@cscqlobal.com

Date: January 31, 2019

Order#: 594667/010

Re: IAS WARRANTY SERVICES OF FLORIDA, INC.

Enclosed please find:

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

.XX Return Regular Mail in the enclosed envelope.

Attn:Ami Casper c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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

statement of che	provisions of sections 607.0502, 617.05 ange is submitted for a corporation orga ar to change its registered office or regis	nized under the l	aws of the State	of Florida				
1. The name of	the corporation: IAS WARRANTY SER	VICES OF FLOR	RIDA, INC.					
2. The principal office address: 10800 Pecan Park Boulevard, Suite 410, Austin, TX 78750								
3. The mailing a	address (if different):							
4. Date of incor	Document number: P05000155705							
	d street address of the current registered a rtment of State: (If resigned, enter resign		red office on file	with the				
	Chief Financial Officer							
	200 4E Gaines Street		1571	2019				
	Tallahassee, FL 32399			The state of the s				
6. The name and (if changed):	d street address of the new registered age	nt (if changed) a	nd /or registered	office				
	Corporation Service Company		:. 	— <u>:</u> :				
	1201 Hays Street	·	*	_				
	P.O. Box NOT Tallahassee	acceptable FL	32301					
The street addre as changed will	ess of its registered office and the street be identical.	address of the b	usiness office of	its registered agent,				
Such change wa authorized by th	is authorized by resolution duly adopted to board or the corporation has been no	l by its board of tified in writing	directors or by a of the change.	n officer so				
		Patrick Brown						
I hereby accept I further agree to performance of agent. Or, if thi hereby confirm	the appointment as registered agent and comply with the provisions of all state my duties, and I am familiar with and a state document is being filed merely to reflict the corporation has been notified in Service Company	d agree to act in utes relative to t ccept the obliga ect a change in t	he proper and co tion of my positi the registered of	omplete ion as registered				
By: Cer	m. Cel	01/3	31/2019					
	nature of Registered Agent		Date	, , , , , , , , , , , , , , , , , , ,				
f signing on bel	nalf of an entity:							
Ami M. Casper,	Asst. Vice President							
Ty	ped or Printed Name							

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

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

statement of ch	provisions of sections 607.0502, 6 ange is submitted for a corporatior er to change its registered office or	n organized under the	laws of th	e State o	of Flori	da
1. The name of	the corporation: IAS WARRANTY	SERVICES OF FLO	ORIDA, INC	D		
2. The principal	office address: 10800 Pecan Par	k Boulevard, Suite 4	10, Austin,	TX 78	750	
3. The mailing a	address (if different):					
4. Date of incor	poration/qualification: 11/21/2009	5 Docume	ent number	P050	0015570	05
5. The name and	d street address of the current regis rtment of State: (If resigned, enter t	tered agent and regis				
	Chief Financial Officer					
	200 4E Gaines Street				_	
	Tallahassee, FL 32399					
6. The name and (if changed):	d street address of the new registere Corporation Service Company	ed agent (if changed)	and /or reg	gistered	o Be	ter (**d) 2 d 1 d 1 d
	1201 Hays Street				<u>ا</u> –	
	- <u></u>	ox NOT acceptable		<u> </u>	_ >	
	Tallahassee	F	L 32301	<u>:</u>	<u>=</u>	
The street addre	ess of its registered office and the be identical.	street address of the	business o	ffice of	its regis	stered agent,
Such change was	is authorized by resolution duly ac the board, or the corporation has be	dopted by its board o en notified in writin	f directors g of the ch	or by a lange.	n office	ι 20
A	PCT	Patrick Brown, President				
Signatu	re of an officer or director	Pr	inted or typed	name and	title	
igent. Or, if thi hereby confirm	the appointment as registered age to comply with the provisions of a my duties, and I am familiar with is document is being filed merely that the corporation has been not n Service Company	'o reflect a change ir	i ine regisi	acity. r and co y positi ered off	mplete on as re lice addi	gistered ress, I
By: Cer	in Ley	01	/31/2019			
Sign	nature of Registered Agent	· 	Date	c		
f signing on bel	half of an entity:					
Ami M. Casper,	Asst. Vice President					
Ŧy	ped or Printed Name					

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