No. W 139174 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720	Due no later than Jun 30, 2015 Annual Report Form 1. Mailing Address: Correct in this box if needed. BKFS I SERVICES, LLC C/O APRIL JOHNSON	2. Registered Agent and Address (NO PO BOX) C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705			
NO FILING FEE IF RECEIVED BY DUE DATE	601 RIVERSIDE AVE JACKSONVILLE FL 32204	3. New Registered Agent Signature:*			
4. Limited Liability Companies: Enter I Office Held Name	Names and Addresses of at least one Member or Manager. Street or PO Address	Citv	State	Country	Postal Code
	GHT FINANCIAL SERVICES, 601 RIVERSIDE AVENUE	JACKSONVILLE	FL	USA	32204
5. Organized Under the Laws of: DE W 139174	6. Annual Report must be signed.* Signature: Black Knight Financial Services, LLC Name (type or print): Black Knight Financial Services, LLC			Date: 07/1	• 00-10-10-10-10-10-10-10-10-10-10-10-10-1
Processed 07/14/2015	* Electronically provided signatures are accepted as original signatures.				