## F1800000398

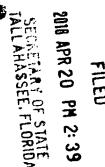
(Re	equestor's Name)	
(Address)		
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	WAIT	_
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Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		
		1

Office Use Only



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C. GOLDEN APR 23 2018

## **COVER LETTER**

Division of Corporations		
SUBJECT: Change Office of R Name DOCUMENT NUMBER: CR2E12	x Adjusting Inc.	
DOCUMENT NUMBER: CR2E12	7 (8/08)	
	Change/Add Officer(s) and/or Director(s) and fee are	
Please return all correspondence concerning this n	natter to the following:	
Name of Contact Person		
Rx Adjusting ho		
333 Maple Ave Address		
Drexel Hill PA 19026 City/State and Zip Code		
E-mail address: (to be used for future annual repo		
E-mail address: (to be used for future annual repo	rt notification)	
For further information concerning this matter, ple	ease call:	
Name of Contact Person A	540 ) 250-3883 rea Code & Daytime Telephone Number	
Enclosed is a check made payable to the Florida D	epartment of State for the following amount:	
\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)  \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)	
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building	
1 allalia5500. I'L 34314	2661 Executive Center Circle	

Tallahassee, FL 32301

TO: Amendment Section



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

FILED 2018 APR 20 PM 2: 39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

## AFFIDAVIT BY FOREIGN CORPORATION TO CHANGE/ADD OFFICER(S) AND/OR DIRECTOR(S)

(Note: Applicable only during the first calendar year of qualification) The name of the foreign corporation as it appears on the records of the Florida Department of State is: This entity was authorized to transact business in Florida on 23 2015 and its Florida document number is F1 \$ 000000398 3. This corporation was formed under the laws of Pennsylvan 4. The name and address of each officer and/or director is as follows: Title: Name and Address President (Attach additional pages if necessary)

FILING FEE \$35

Make checks payable to Florida Department of State and Mail to: Division of Corporations•PO Box 6327•Tallahassee, FL 32314

Signature of an officer or director

Thomas M. Scott
Typed or printed name of person signing