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ALORETAGI M A CALLA TALLAHASSEE, FLORIDA

AUG 07 2015

R. WHITE



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscglobal.com

Date: August 4, 2015

Order#: 732421-084

Re: PHYSICIANS FOR SOCIAL RESPONSIBILITY, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35 .

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: Janis M. Smith

c/o Corporation Service Company
2711 Centerville Road, Suite 400

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.

QUCA.XCOA

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

	Assistant Vice President			
f signing on bel	half of an entity:			
	nature of Registered Agent		Date	
gent. Or, if thi ereby confirm i	my duties, and I am familiar with and is document is being filed merely to rethat the corporation has been notified in Service Company	tlect a change in the	e registered ofti	n as registered ce address, I
hereby accept further agree t	the appointment as registered agent a o comply with the provisions of all sto my duties, and I am familiar with and	and agree to act in that atutes relative to the	his capacity. e proper and cor	nplete
Signatur	e of an officer or director		or typed name and ti	
uch change wa uthorized by th	s authorized by resolution duly adopte e board, or the corporation has been r	ed by its board of di notified in writing of Dona Priebe		
=	ss of its registered office and the street be identical.			
	Tallahassee	FL	32301	-
		O'l' acceptable		
	1201 Hays Street			-
·	Corporation Service Company			22 IDA
. The name and (if changed):	street address of the new registered ag	gent (if changed) and	l /or registered o	mice o
	Plantation	FL	33324	SSEL A
	1200 South Pine Island Road			SALA LAHA
	NRAI Services, Inc			- E 5
	street address of the current registered tment of State: (If resigned, enter resig	-	d office on file v	vith the
. Date of incorp	poration/qualification: 05/14/1998	Document n	number: <u>F98000</u>	002763
. The mailing a	ddress (if different):			
Washington,	DC 20005			
	office address: 1111 14th Street, Suite			
. The name of t	he corporation:	CIAL KEOL ONOID	ici i i ii i i i i i i i i i i i i i i	
The name of t	he corporation: PHYSICIANS FOR SC	CIAL RESPONSIBL	ILITY INC	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314