## M07000001393

(Requestor	's Name)					
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP	WAIT MAIL					
(Business	Entity Name)					
(Document Number)						
Certified Copies	Certificates of Status					
Special Instructions to Filing C	Officer:					
	:					

Office Use Only



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N. Cuffgan AUG 1 8 2015



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard lindsey.lockard@cscglobal.com\_

Date: August 12, 2015

Order#: 726002-043

Re: MCMC INDEPENDENT EXAMS, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

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: Lindsey Lockard

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 LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

2. (a)	300 CROWN COLONY	R. SUITE 203	(b	)		
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)		-
	QUINCY	MA 02169	<del></del>			
	12/19/2007			M07000	007393	
3.	Date of filing/reg	gistration in Florida	4.		Document number	
5. (a)	REGISTERED AGENT	F SOLUTIONS, INC.				
( )		ed Office shown on the records	of the Florida	Dept. of Sta	te:	
	155 OFFICE PLAZA DE	RIVE, SUITE A				
		MUST BE FLORIDA STREE	T ADDRESS	2	<del></del>	
					54	2015
	TALLAHASSEE	, I	FL 32301			300
(b)	Corporation Service Cor	npany				100 14
(-)		d Agent and/or NEW Register	ed Office ad	<u>dress</u> :	- Comment	₹ Ģ
	1201 Hays Street				22 A	<b>,</b> 44
	NEW Registered Office Addre	ess:			<del>-</del>	
					_	
	Tallahassee	, F	L_32301		_	
the cha agent v was/we	ange or changes are made, will be identical. Or, in the	the Florida street address c case of a Florida limited lative vote of the members	of the regis liability co s of the lim	stered offic mpany, it ited liabili	lorida, it is hereby confirmed that after and the business office of the region is hereby confirmed that the change ty company or as otherwise provide mpany.	istered (s)
	126.		Don	a Priebe, A	Authorized Person	
Signa	ture of a member or authorized r	epresentative of a member			Printed or typed name of signee	
provisi the obl to merc	by accept the appointment ions of all statutes relative ligations of my position as ely reflect a change in the d in writing of this change.	to the proper and comple registered agent as provid registered office address,	gree to act te performa led for in C I hereby co	in this cap ance of my Chapter 60 onfirm that	pacity. I further agree to comply wi duties, and I am familiar with and 5, F.S. Or, if this document is being the limited liability company has b	ith the accept g filed eeen
Signatu	re of Registered Agent Corpor	Tybl	BY G	race F. Ki	irby, Assistant Vice President	