## F00000005428

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(Ci	ty/State/Zip/Phone	#)	
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☐ PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
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(Document Number)			
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Certified Copies	Certificates	of Status	
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Special Instructions to Filing Officer:			
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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Marissa Rather-lopez marissa.pitts@cscglobal.com

Date: November 21, 2016

Order#: 352275-200

. Re: QUALINK, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

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: Marissa Rather-lopez 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

statement of cha	inge is submitted for a corporation org	9502, 607.1508, or 617.1508, Florida Statutes, this ganized under the laws of the State of WI	
		istered agent, or both, in the State of Florida.	
1. The name of	the corporation: QUALINK, INC.		
	office address: m Road Horsham Corporate Center H		
3. The mailing a	address (if different): 3850 N. Causew	yay Boulevard, Suite 200, Metairie, LA 70002	
4. Date of incor	poration/qualification: 09/28/2000	Document number: F0000005428	
	d street address of the current registere rtment of State: (If resigned, enter resigned)	d agent and registered office on file with the gned)	
	C T CORPORATION SYSTEM		
	1200 SOUTH PINE ISLAND ROAD		
	PLANTATION	FL 33324	
6. The name and (if changed):	d street address of the new registered a	FL 33324 gent (if changed) and /or registered office	
	Corporation Service Company		
	1201 Hays Street		
		IOT acceptable	
	Tallahassee	FL 32301	
The street address changed will	ess of its registered office and the stre be identical.	et address of the business office of its registered agent,	
Such change wa authorized by the	as authorized by resolution duly adopt ne board, or the corporation has been	ted by its board of directors or by an officer so notified in writing of the change.	
Xie	e 2 agrie	Jill Cilmi, Vice President	
I hereby accept I further agree performance of agent. Or, if th hereby confirm	my duties, and I am familiar with and	Printed or typed name and title and agree to act in this capacity. atutes relative to the proper and complete d accept the obligation of my position as registered eflect a change in the registered office address, I d in writing of this change.	
By: Dr	re Cokubi	11/16/2016	
Sig	nature of Registered Agent	Date	
If signing on be	half of an entity:		
	Asst. Vice President		
T	yped or Printed Name		

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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