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(((H16000017581 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number: FCA000000023

Fax Number

: (850)205-8842 : (850)878-5368

\*\*Enter the email address for this business entity to be used for futdre annual report mailings. Enter only one email address please.\*\*

		S Ema	il Address	:_
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## REGISTERED AGENT CHANGE AMERICA'S CHOICE, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

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1/21/2016 2:57:51 PM From: To: 8506176380( 2/3 )

## COVER LETTER

TO:	Amendment Section Division of Corporations				
:	America's Choice, Inc.				
SUBJ		of Corporation			
•	F0400006238	•			
DOC	UMENT NUMBER:				
The er	nclosed Statement of Change of Registered O	ffice/Agent and fee are submitted for filing.			
Picase	e return all correspondence concerning this ma	atter to the following:			
	Name of	Name of Contact Person			
	Firm	/Company			
	A	ddress			
	·				
	City/State	and Zip Code			
	OKY/Oute	and 2.p code			
•					
	E-mail address: (to be used fo	r future annual report notification)			
For fur	ther information concerning this matter, please	se call:			
<del></del>	Name of Contact Person	at () Area Code & Daytime Telephone Number			
Enclose	ed is a \$35,00 check made payable to the Dep	artment of State.			
	Mailing Address	Street Address:			
	Mailing Address: Amendment Section	Street Address: Amendment Section			
	Division of Corporations	Division of Corporations			
	P.O. Box 6327 Tallahassee FI 32314	Clifton Building 2661 Executive Center Circle			
	Tallahassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

CR2E045 (03/12)

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

statement of ch	ange is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Delaware egistered agent, or both, in the State of Florida.	
	the corporation: America's Choice, Inc		
	l office address: C/O NCS PEARSON,		_
	N VALLEY DRIVE, BLOOMINGTON		_
3. The mailing	address (if different):		_
4. Date of incor	poration/qualification: 11/1/2004	Document number: F04000006238	
	d street address of the current register rtment of State: (If resigned, enter res	red agent and registered office on file with the signed)	
	NRAI SERVICES, INC.	201	
	1200 SOUTH PINE ISLAND ROAD,	PLANTATION, FL 33324	-17
			1
6. The name and (if changed);	d street address of the new registered	agent (if changed) and/or registered office	
	C T Corporation System	9: 00 1025	
	c/o C T Corporation System, 1200 Sou	th Pine Island Road	
		NOT acceptable	
	Plantation, Florida 33324		
The street address changed will	ess of its registered office and the str	reet address of the business office of its registered agent,	
		pted by its board of directors or by an officer so inotified in writing of the change.	
		Jennifer Kurz, VP	
_	re plan officer or director	··	
I hereby accept I further agree t performance of agent. Or, if the hereby confirm	of appointment as registered age of comply with the provisions of all s by duties, and I am familiar with an is document is being filed merely to r that the corporation has been notifie	and agree to act in this capacity, statutes relative to the proper and complete ad accept the obligation of my position as registered reflect a change in the registered office address, I ad in writing of this change.	
By: GT Corp	poration-System	1/20/2016	
Sign	nature of Registergo and	Date	
If signing on bel	half of an entity: James M. H	-lalpin	
	Assistant Sec	•	
Τ̈́γ	rped or Printed Name		

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)