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

statement of cha	provisions of sections 607.0502, 61 age is submitted for a corporation of	organized under the laws	of the State of	Texas	
	to change its registered office or reference to the corporation: INTEGRA T	·			L, INC
2. The principal	office address:SEARCH BLVD. SUITE 74	aniania de la compania del compania de la compania del compania de la compania del la compania de la compania della compania d			8750
_	ddress (if different):	5 AUSTI	N T)	(7	8750
4. Date of incomp	oration/qualification: March 1	7, 2006 Document nu	mber: F060	00001	712
	street address of the current registe tment of State: (If resigned, enter re		office on file with t	he	
	CT Corpor	ation System			
	1200 South P	ine Island Road			
	Plantatio	n, FL 33324		ALL S	<u></u>
6. The name and (if changed):	street address of the new registered	d agent (if changed) and	or registered office	AHASSI	
	National Corporate F	Research, Ltd.,	Inc.		e IV
	155 Office Plaza Dri				
	Tallahassee, FL 32	x NOT acceptable	<u> </u>	<u>P</u> in u	Đ
The street addre	ss of its registered office and the sbe identical.	treet address of the busin	ness office of its re	gistered a	igent,
Such change wa	s authorized by resolution duly ad e board, or the corporation has be	opted by its board of dir en notified in writing of	ectors or by an offi the change.	cer so	
Signatur	re of an officer or director		agas Pres	ident	<u> </u>
I hereby accept I further agree to performance of agent. Or, if thi hereby confirm	the appointment as registered age o comply with the provisions of al my duties, and I am familiar with s document is being filed merely to that the corporation has been noti	nt and agree to act in th I statutes relative to the and accept the obligation o reflect a change in the fied in writing of this cha	is capacity. proper and comple n of my position as registered office ac ange.	te registere Idress, I	d
papel-c	nature of Registered Agent	-2/8/2	013		- Anna Maria
	nature of Registered Agent	1 (Date		
Mar	k Thomas Printed Name				

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)

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