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Division of Corporations

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From:

Account Name : BUSINESS FILINGS Account Number : 105256001620

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annual report mailings. Enter only one email address please.**

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REGISTERED AGENT CHANGE 20/20 RESEARCH, INC.

Certificate of Status	0
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JAN 13 2020

Jax audit # 4200001047/3

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

statement of ch	te provisions of sections 607.0502, 617.0502, 607.1508, or 617.150 change is submitted for a corporation organized under the laws of the ader to change its registered office or registered agent, or both, in th	e State of Tennessee		
	of the corporation: 20/20 RESEARCH, INC.	Comme of 1 for Mar.		
	al office address: 161 Rosa L Parks Blvd, Nashville, Tennessee 37203			
3. The mailing	g address (if different):			
4. Date of inco	orporation/qualification: 3/24/2006 Document number	r. F06000001915		
5. The name an	and street address of the current registered agent and registered offic partment of State: (If resigned, enter resigned)		(C)	
	3	Z C		
	1200 South Pine Island Road		2003 2003 2003	
	Plantation, FL 33324	Š	AHASSER	ć
6. The name as (if changed):	und street address of the new registered agent (if changed) and /or re): Business Filings incorporated	gistered office	OF STATE	
	1200 South Pine Island Road			
	P.O. Box NOT acceptable			
	Plantation, Florida 33324	······		
	dress of its registered office and the street address of the business ill be identical. was muthorized by resolution duly adopted by its board of director the poard, or the corporation has been notified in writing of the corporation.		τ.	
JU	John Pflum, CFO			
Signal Signal		d came and fill;		
I hereby accept further agree performance of agent. Or, if the large of the large o	pt the appointment as registered agent and agree to act in this case to comply with the provisions of all statutes relative to the prop of my duites, and I am familiar with and accept the obligation of this document is being filed merely to reflect a change in the region that the corporation has been notified in writing of this change	pacity: er and complete ny position as registered stered office address, I		
New	2nd day of January, 2	1020		
	Signature of Registered Agent D	a te		
If signing on b	behalf of an entity:			
Mark Williams,	s, AVP			
	Typed 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)

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