F07000002870

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	· · · · · · · · · · · · · · · · · · ·
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
·		

Office Use Only



200252243852

10/09/13--01023--011 **35.00

RA|RO|Ch8 (10.10.13)



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Christopher Masker cmasker@cscinfo.com

Date: October 7, 2013

Order#: 816309-010

Re: HUMAN RESOURCES UNLTD. INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35 .

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: Christopher Masker

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

		617.0502, 607.1508, or 617.1508, Florida Statutes, this on organized under the laws of the State of Michigan	
		or registered agent, or both, in the State of Florida.	
		CHNICAL RESOURCES /HUMAN RESOURCE	<u>5 l</u>
2. The principal	l office address: 3451 Dunckel Ro	ad Suite 200, Lansing, MI 48911	
	2 11-11-11-11-11-11-11-11-11-11-11-11-11-		
3. The mailing	address (if different):		
4. Date of incor	poration/qualification: 05/31/200	Document number: F07000002870	
	d street address of the current regi artment of State: (If resigned, enter	istered agent and registered office on file with the resigned)	پدي
	Business Filings Incorporated	resigned) 3	•
	515 E. Park Avenue	<u></u>	
	Tallahassee	FL 32301	
6. The name an (if changed):	_	FL 32301	ب ا
	1201 Hays Street		
	-	Box NOT acceptable	
	Tallahassee	FL 32301	
· ·		e street address of the business office of its registered agen	t,
Such change wauthorized by t	ras authorized by resolution duly he board, or the corporation has	adopted by its board of directors or by an officer so been notified in writing of the change.	
		Dona Priebe, Vice President	
I hereby accept I further agree performance of agent. Or, if the hereby confirm	to comply with the provisions of f my duties, and I am familiar wil	Printed or typed name and title sign and agree to act in this capacity. all statutes relative to the proper and complete th and accept the obligation of my position as registered by to reflect a change in the registered office address, I otified in writing of this change.	
By: Six	in august	10/07/2013	
	gnature of Registered Agent	Date	
If signing on b	ehalf of an entity:		
	et, Asst. Vice President	_	
	Typed or Printed Name * * * ICH	ING FEE: \$35.00 * * *	
	[17]	114 T 1212. \$33.00	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314