## F08 0000004672

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: June 5, 2019

Order#: 778728-098

Re: THE RESEARCH BOARD, 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: Ami Casper c/o Corporation Service Company 251 Little Falls Drive 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 ch	provisions of sections 607.0302, 617.03 ange is submitted for a corporation orgo er to change its registered office or regi	anized under the li	aws of the State o	f Delaware		-
	the corporation: THE RESEARCH BO	-	nn, in the state of	i rioriaa.		
	office address: 5 W. 54th Street, New					
3. The mailing a	address (if different):					
4. Date of incor	poration/qualification: 10/28/2008	Document	number: F0800	0004672		
5. The name and Florida Depart	d street address of the current registered rtment of State: (If resigned, enter resign	agent and register ned)	red office on tile v	with the		
	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 agent (if changed) and /or registered office SEC ART Corporation Service Company					
	1201 Hays Street	·- · · · · · · · · · · · · · · · · · ·		- SSA	7 4	
P.O. Box NOF acceptable						
	Tallahassee	FL	32301		<u></u>	-
as changed will					i agen	ıt.
Such change wa author(124d by th	as authorized by resolution duly adopte ne board, or the corporation has been no	d by its board of cotified in writing o	lirectors or by an of the change.	officer so		
_ Xie	2 agni	Jill Cilmi, Vice I				
I hereby accept I further agree to performance of agent. Or, if this hereby confirm.	the appointment as registered agent ar to comply with the provisions of all stat my duties, and I am familiar with and a is document is being filed merely to ref that the corporation has heen notified in Service Company	nd agree to act in tutes relative to th accept the obligat	te proper and con ion of my position re registered offi	mplete n as register	red I	
Signature of Registered Agent Date					<del></del>	
lf signing on bel	half of an entity:					
Ami M. Casper,	Asst. Vice President					
Ту	ped or Printed Name					
	* * * FILING FF	E: \$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)