Division of Corporations

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Account Name : C T CORPORATION SYSTEM

Account Number : FCAD00000023 Phone : (850)222-1092 Fax Number : (850)878-5368

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## REGISTERED AGENT CHANGE ACCORD HUMAN RESOURCES 17 INC.

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Flo	
statement of change is submitted for a corporation organized under the laws of the Sta in order to change its registered office or registered agent, or both, in the Sta	-
. = - = - = - = - = - = - = - = - = - =	te of Pioriua.
1. The name of the corporation: ACCORD HUMAN RESOURCES 17 INC.	
2. The principal office address:	<u> </u>
·	
3. The mailing address (if different):	
No. 1	
4. Date of incorporation/qualification: 7/22/2011 Document number: F11	1000002979
<ol><li>The name and street address of the current registered agent and registered office on Florida Department of State: (If resigned, enter resigned)</li></ol>	file with the
Jones, John L.	•
410 WARE BLVD., #716 TAMPA, FL 33619	13 OCT
	<del></del> · · • <b>6</b> 5
6. The name and street address of the new registered agent (if changed) and /or register (if changed):	AM 10: 45
C T Corporation System	Ö
c/o C T Corporation System, 1200 South Pine Island Road	
P.O. Box NOT acceptable	<del></del>
Plantation, Plorida 33324	·
The street address of its registered office and the street address of the business office as changed will be identical.	e of its registered agent,
Such change was authorized by resolution duly adopted by its board of directors or be authorized by the poart of the corporation has been notified in writing of the change	by an officer so
Jannifer Kurz Vice President	_
Signative A life officer or director Printed or typed name	
I hereby accept he appointment as registered agent and agree to act in this capacity I further agree to comply with the provisions of all statutes relative to the proper an performance of my dulies, and I am familiar with and accept the obligation of my paragram. Or, it his document is being filed merely to reflect a change in the registered hereby confirm that the corporation has been notified in writing of this change.	d complete stition as registered d office address, I
Ву: 10/16/2013	
Signature of Registered Agent Kristin Bolden Date	
If signing on behalf of an entity Assistant Secretary	
The state of the s	
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, TALLAHASSBE, FL 32314
CR2E045 (03/12)