

Division of Corporations

Figure 1 Department of State

Division of Corporations

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To:

Division of Corporations

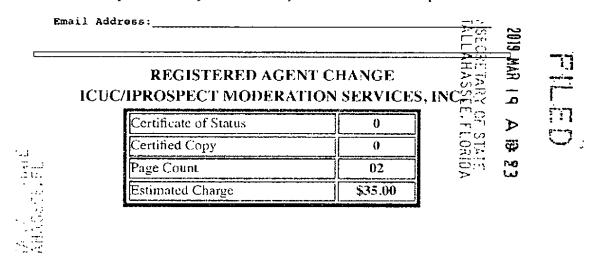
Fax Number : (850)617-6380

From:

Account Name : UNITED AGENT GROUP INC.

Account Number : I20160000086 Phone : (561)508-5033 Fax Number : (561)694-1639

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.



MAR 2 0 1919

3/19/19, 10:55 AM

T. LEMIEUX

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

statement of En a	nge is submitted for a corporation organ	02, 607,1508; or 617,1508, Florida Statutes, this nized under the laws of the State of Delaware tered agent, or both, in the State of Florida.
1. The name of t	he corporation: ICUC/iProspect	Moderation Services, Inc.
2. The principal office address: 200 Clarendon Street, 23rd Floor Boston, MA 02116		
3. The mailing a	ddress (if different):	
4. Date of incorp	poration/qualification: 10/22/2012	Document number: F1200004300
	street address of the current registered attent of State: (If resigned, enter resign	agent and registered office on file with the ed)
	C T CORPORATION SYS	STEM
	1200 SOUTH PINE ISLA	ND ROAD
	PLANTATION, FL 33324	20 20 20 20 20 20 20 20 20 20 20 20 20 2
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): United Agent Group Inc.		
	United Agent Group Inc.	
	11380 Prosperity Farms F	
	Palm Beach Gardens, FL	l'acceptable 22 F
The street addre	ess of its registered office and the street be identical.	address of the business office of its registered agent,
Such change wa	s authorized by resolution duly adopted the board, or the corporation has been no	by its board of directors or by an officer so tified in writing of the change.
	ANS.	Lauren Duenas, Attorney-in-Fact
I hereby accept I further agree t performance of agent. Or, if thi	my duties, and I am familiar with and a	nd agree to act in this capacity. tates relative to the proper and complete accept the obligation of my position as registered ect a change in the registered office address. I
	LD CD	03/19/2019
Sigr	nature of Registered Agent	Date
•	half of an entity:	
	enas, Special Secretary	
1)	* * * FILING FF	F·\$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)