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PERSONAL OF STAFF





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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Mary Rivers mary.rivers@cscglobal.com

Date: May 20, 2016

Order#: 137859-014

Re: MDVIP RISK PURCHASING GROUP ASSOCIATION

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

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: Mary Rivers c/o Corporation Service

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

statement of cha	nge is submitted for a corporati	617.0502, 607.1508, or 617.1508, Florida Statutes, this on organized under the laws of the State of Delaware or registered agent, or both, in the State of Florida.	
1 The name of t	he corporation. MDVIP RISK P	URCHASING GROUP ASSOCIATION CORPORATION	
		ICATION AVE., SUITE 100, BOCA RATON, FL 33431	
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 04/09/20	13Document number: F13000001552	
	street address of the current reg tment of State: (If resigned, ente	ristered agent and registered office on file with the resigned)	
	CORPORATE CREATIONS N	ETWORK INC.	
	11380 PROSPERITY FARMS RD #221E		
	PALM BEACH GARDENS, FL	33410	
6. The name and (if changed):	street address of the new registe	ered agent (if changed) and /or registered office	
	Corporation Service Company	MAY ZONE 2	
	1201 Hays Street		
		Box NOT acceptable FL 32301	
	Tallahassee	FL 32301	
The street addre as changed will	ss of its registered office and th be identical.	e street address of the business office of its registered agent,	
Such change wa authorized by th	s authorized by resolution duly e board, or the corporation has	adopted by its board of directors or by an officer so been notified in writing of the change.	
<u> </u>	. E. Wener	Jill Cilmi, Vice President	
I hereby accept I further agree t performance of l agent. Or, if thi hereby confirm t	o comply with the provisions of mv duties, and I am familiar wi	Printed or typed name and title segent and agree to act in this capacity. fall 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: Drace	C-Kuby ature of Registered Agent	05/11/2016 Date	
If signing on bel	,	Date	
Grace E. Kirby,	Asst. Vice President		
	ped or Printed Name	_	

* * * FILING FEE: \$35.00 * * *