F13000003/15

(Re	equestor's Name)	1		
(Ac	ldress)	·		
(Ac	ldress)			
(Ci	ty/State/Zip/Phor	ne #)		
PICK-UP	MAIT WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate	s of Status		
Special Instructions to Filing Officer:				





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08/29/16--01025--027 **35.00

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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: April Pagliassotti april.pagliassotti@cscglobal.com

Date: August 25, 2016

Order#: 266385-010

Re: GRAYLING ASSOCIATES, 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: April Pagliassotti 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	provisions of sections 607.0502, 617.050 nge is submitted for a corporation organ r to change its registered office or registe	ized under the laws of the State of Coni	necticut	
	he corporation: GRAYLING ASSOCIAT	·		
2. The principal	office address: 699 Bloomfield Avenue, I	Bloomfield, CT 06002		
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 07/17/2013	Document number: F130000031	15	
	street address of the current registered attment of State: (If resigned, enter resigne		ne :	
	NRAI Services, Inc.		22	
	1200 South Pine Island Road		AUS 2	
	Plantation	FL 33324	3388 SSE SSE SSE SSE SSE SSE SSE SSE SSE S	
6. The name and (if changed):	ne and street address of the new registered agent (if changed) and /or registered office			
	1201 Hays Street P.O. Box NOT	accentable		
	Tallahassee	FL 32301		
as changed will		_		
Such change wa authorized by th	s authorized by resolution duly adopted e board, or the corporation has been not	by its board of directors or by an offic ified in writing of the change.	er so	
X_{λ}	ie 2 Gonei	Jill Cilmi, Vice President		
I hereby accept I further agree to performance of agent. Or, if this hereby confirm to Corporation	the appointment as registered agent and comply with the provisions of all statumy duties, and I am familiar with and as document is being filed merely to reflect that the corporation has been notified in Service Company	ites relative to the proper and complete scept the obligation of my position as r ect a change in the registered office ad	egistered	
<u>-1.5 C.0000</u>	ature of Registered Agent	Date		
If signing on bel	nalf of an entity:			
	Asst. Vice President			
1 9	* * * FILING FEI	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)