2/9/2015 16:07:24 From: To: 8506176306

Division of Corporations



Florida Department of State

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

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REGISTERED AGENT CHANGE W. RAY WALLACE & ASSOCIATES, INC.

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FEB 1 0 2015

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, Florida Statutes,	this :	
statement of cha	nge is submitted for a corporation organized under the laws of the State of Georgia r to change its registered office or registered agent, or both, in the State of Florida.		C)
1. The name of	he corporation; W. RAY WALLACE & ASSOCIATES, INC.	17, 5	<u>- []</u>
2. The principal		<u> [1] (</u>	
ONE ADP B	DULEVARD ROSELAND, NJ 07068		75P
3. The mailing a	ddress (if different):	<u> </u>	_
			(i)
4. Date of incorp	poration/qualification: 04/03/2014 Document number: F14000001484		
5. The name and	street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)		
	NATIONAL REGISTERED AGENTS, INC.		
	1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		
6. The name and (if changed):	i street address of the new registered agent (if changed) and /or registered office		
	C T Corporation System		
	c/o C T Corporation System, 1200 South Pine Island Road		
	P.O. Box NOT acceptable		
	Plantation, Florida 33324		
The street address changed will	ess of its registered office and the street address of the business office of its regist be identical.	ered ager	at,
Such change wa authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer the board, or the corporation has been notified in writing of the change.	50	
Break	Bruce C. Wechsler Secretary		
	re of an officer or director Printed of typed name and little		
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete my dulies, and I am familiar with and accept the obligation of my position as reg is document is being filed merely to reflect a change in the registered office addre that the corporation has been notified in writing of this change.	istered 148, I	
By: /// Cor	poration System 1/27/2015		
- CANA	nature of Registered Agant Date		
If signing on be	half of an entity: Alfred Younan		
J 4	Assistant Secretary		
	yped or Printed Name		

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

PLOOS - 65/25/2013 Welters Khreer Outing

CR2E045 (03/12)