## F1500003975

(Requestor's Name)				
(Address)				
(Ad	ldress)			
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				





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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: Janis M. Smith janis.smith@cscglobal.com

Date: January 12, 2016

Order#: 932095-015

Re: RESEARCH AND DIAGNOSTIC SYSTEMS, 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: Janis M. Smith

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 inge is submitted for a corporation orga r to change its registered office or regist	nized under the la	ws of the State of Minnesota	
1. The name of t	he corporation: RESEARCH AND DIAG	NOSTIC SYSTE	MS, INC.	
2. The principal CT CORPOR	office address:	ISLAND ROAD,	PLANTATION, FL 33324	
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 08/24/2015	Document	number: F15000003975	
	I street address of the current registered attended to the transfer of State: (If resigned, enter resign	~ ~	ed office on file with the	
	CT CORPORATION SYSTEM			
	1200 SOUTH PINE ISLAND ROAD			
	PLANTATION	FL	33324	
6. The name and (if changed):	street address of the new registered age	ent (if changed) ar	nd /or registered office	
	Corporation Service Company		·	
	1201 Hays Street			
	P.O. Box NOT acceptable			
	Tallahassee	FL	32301	
The street addre as changed will	ess of its registered office and the street be identical.	address of the bu	siness office of its registered agent,	
Such change wa authorized by th	s authorized by resolution duly adopted to board, or the corporation has been no	d by its board of o tified in writing	directors or by an officer so of the change.	
		Dona Priebe, V		
	re n officer or director		ed or typed name and title	
I further agree t performance of agent. Or, if thi hereby confirm	the appointment as registered agent an ocomply with the provisions of all statemy duties, and I am familiar with and of statemy to refit to refit the corporation has been notified in Service Company	utes relative to thaceept the obligation	ne proper and complete tion of my position as registered	
By: In	ace C-Kubi	01/08/2016		
Sign	nature of Registered Agent		Date	
If signing on bel	half of an entity:			
Grace E. Kirby,	Asst. Vice President			
Ту	rped or Printed Name			

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