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(Busi	ness Entity Nam	ne)
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Office Use Only



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C. GOLDEN FEB 1 3 7019



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Katie Boese katie.thomas@cscglobal.com

Date: February 4, 2019

Order#: 604220-013

Re: MEDIFIT CORPORATE SERVICES, INC.

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: Katie Thomas c/o Corporation Service Company 251 Little Falls Drive 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 orga r to change its registered office or regist	nized under the laws of the State of	New Jersey	
 The name of t The principal 	he corporation: MEDIFIT CORPORATE office address: 25 HANOVER RD FLOR	SERVICES, INC. RHAM PARK, NJ 07932		
3. The mailing a	ddress (if different);			
4. Date of incor	poration/qualification: 04/03/2017	Document number: F17000	0001564	
5. The name and Florida Depart	I street address of the current registered attent of State: (If resigned, enter resign	agent and registered office on file velocities	with the	
	C T CORPORATION SYSTEM		_	
	1200 SOUTH PINE ISLAND ROAD		_	
	PLANTATION, FL 33324		2019 FEB	
6. The name and (if changed):	d street address of the new registered ago	ent (if changed) and /or registered o	office 6	
	Corporation Service Company	····		
	1201 Hays Street	VI acceptable	5: 5 <u>-</u>	
	Tallahassee, FL 32301	1 acceptable	—	
The street address changed will	ess of its registered office and the street be identical.	t address of the business office of	its registered age	nt,
	as authorized by resolution duly adopte he board, or the corporation has been no			
Car	re of an officer of director	Cara Soffer, Assistant Secretar		_
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered agent as to comply with the provisions of all states of the state	nd agree to act in this capacity. Itutes relative to the proper and ca accept the obligation of my positi flect a change in the registered off		
ву: Жл	aca CKuble gnature of Registered Agent	01/03/2019		_
•	chalf of an entity:	2		
	, Asst. Vice President			
1	yped or Printed Name			

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