

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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06/12/17--01030--009 **35.00

TCCCO JUN 15 2017

R. WHITE



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Grace Kirby grace.kirby@cscglobal.com

Date: June 8, 2017

Order#: 673333-035

Re: VETERINARY DATA SERVICES, 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: Grace Kirby c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

<u>XX</u> 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 corporatio	617.0502, 607.1508, or 617.1508, Flor in organized under the laws of the State ir registered agent, or both, in the State	of KY
1. The name of t	he corporation: VETERINARY D	ATA SERVICES, INC.	
2. The principal	office address: 200 Lexington Gr	een Circle, Suite 190, Lexington, KY	40503
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 04/11/201	7 Document number: F170	000001634
	I street address of the current regitment of State: (If resigned, enter	stered agent and registered office on fil resigned)	e with the
	NRAI Services, Inc.		
	1200 South Pine Island Road		
	Plantation	FL 33324	
6. The name and (if changed):	street address of the new registe	red agent (if changed) and /or registered	<i>)</i> 53
	Corporation Service Company		- · · · · · ·
	1201 Hays Street		
		Box NOT acceptable	
	Tallahassee	FL 32301	
The street addre as changed will	ess of its registered office and the be identical.	e street address of the business office of	of its registered agent,
Such change wa authorized by th		adopted by its board of directors or by been notified in writing of the change.	an officer so
X	el C. agni	Jill Cilmi	Vice President
I hereby accept I further agree to performance of agent. Or, if thi hereby confirm	o comply with the provisions of my duties, and I am familiar with	Printed or typed name as gent and agree to act in this capacity. all statutes relative to the proper and h and accept the obligation of my post to reflect a change in the registered of this change.	complete ition as registered
By: Drace		06/08/2017	
_	nature of Registered Agent	Date	
If signing on bel	half of an entity:		
	Asst. Vice President	_	
Ty	ped or Printed Name		

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