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(Re	equestor's Name)					
(Ac	ldress)					
(Ac	ldress)					
(Cit	ty/State/Zip/Phon	e #)				
PICK-UP	☐ WAIT	MAIL				
(Ви	ısiness Entity Nar	me)				
(Document Number)						
Certified Copies	Certificates	s of Status				
Special Instructions to	Filing Officer:					
		:				

Office Use Only 1



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مرجوات والمحمد

01/09/15--01017--002 **35.00



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard llockar2@cscinfo.com

Date: January 7, 2015

Order#: 433342-114

Re: FINRA REGULATION, 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: Lindsey Lockard 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

	provisions of sections 607.0502, ange is submitted for a corporati			_	_	is	
	r to change its registered office	_		•			-
1. The name of	the corporation: FINRA REGUL	ATION, INC	<u>. </u>				
	office address:				<u> </u>		
3. The mailing a	address (if different): 9509 Key	West Aven	ue, Rockville,	MD 20850			
4. Date of incor	poration/qualification: 12/15/19	97	Document	number: F970000	06749		
	d street address of the current regrament of State: (If resigned, enter			ed office on file wi	th the		
	CORPORATE CREATIONS NETWORK INC.						
11380 PROSPERITY FARMS RD #221E						15 J	SEC
	PALM BEACH GARDENS		FL	33410		9- NAL	RE TAN
6. The name and (if changed):	I street address of the new regista	ered agent ((if changed) an	nd /or registered off	ice) PM 2:	ED Y OF SIA
	Corporation Service Company						110113 11.
	1201 Hays Street						
P.O. Box NOT acceptable							
	Tallahassee		FL	32301			
The street address changed will	ess of its registered office and the be identical.	e street ado	dress of the bu	siness office of its	registered	ager	ıt,
Such change wa authorized by th	s authorized by resolution duly ne board, or the corporation has	adopted by been notifi	y its board of o	lirectors or by an o of the change.	fficer so		
		C	ona Priebe, V	ice President			
Signatu	c of a secer or disculor			ed or typed name and title			
I further agree to performance of agent. Or, if the hereby confirm	the appointment as registered a comply with the provisions of my duties, and I am familiar wi is document is being filed merel that the corporation has been not Service Company	t all statute; th and acce v to reflect	s relative to th ept the obligat a change in ti	ne proper and comp ion of my position he registered office	ac register	ed '	
By: Sign	nature of Registered Agent	٠ -	12/31/2014	Date			
	half of an entity:	`		Date			
Grace E. Kirby.	Assistant Vice President						
	/ped or Printed Name	_					

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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