## F9800000699

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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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: Mary Rivers mary.rivers@cscglobal.com

Date: February 28, 2017

Order#: 516980-055

Re: COVANCE 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: Mary Rivers

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	ange is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida Statutes, organized under the laws of the State of DELAW egistered agent, or both, in the State of Florida.	
1. The name of	the corporation: COVANCE, INC.		
2. The principal		3540	
3. The mailing a	address (if different):		
4. Date of incor	prporation/qualification: 02/05/1998 Document number: F98000000699		
	d street address of the current registertment of State: (If resigned, enter re	ered agent and registered office on file with the esigned)	2017 MAR
	C T CORPORATION SYSTEM		AR OF
	1200 SOUTH PINE ISLAND ROAI	D	2 A 2 SEC
	PLANTATION	FL 33324	MH 9: 2
6. The name and (if changed):	d street address of the new registered	d agent (if changed) and /or registered office	27
	Corporation Service Company		
	1201 Hays Street		
		NOT acceptable	
	Tallahassee	FL 32301	
The street address changed will	ess of its registered office and the st be identical.	treet address of the business office of its registe	red agent,
Such change was authorized by the	as authorized by resolution duly add ne board, or the corporation has bee	opted by its board of directors or by an officer sen notified in writing of the change.	o
$X_{i}$	Jill Cilmi, Vice President		
Signiti	ne of an officer or director	Printed or typed name and title	
I further agree performance of agent. Or, if th hereby confirm	my duties, and I am familiar with a	nt and agree to act in this capacity. I statutes relative to the proper and complete and accept the obligation of my position as regi o reflect a change in the registered office addre. fied in writing of this change.	stered ss, I
By: I I NO	100 CXVD10	02/22/2017	
	nature of Registered Agent	Date	
If signing on be	chalf of an entity:		
Grace E. Kirby	, Assistant Vice President		
Т	yped or Printed Name		

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