(Re	equestor's Name)			
(Ad	dress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phon	e #)		
PICK-UP	WAIT	MAIL		
(Bu	ısiness Entity Nar	me)		
(Document Number)				
Certified Copies	_ Certificate:	s of Status		
Special Instructions to Filing Officer:				
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SECRETARY OF STATE
TALLAHASSEE.FLORIDA

Office Use Only

RAPOChange



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Chelsey Martine cmartin0@cscinfo.com

Date: September 19, 2014

Order#: 295129-009

Re: MINDTECK, 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: Chelsey Martine

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	nge is submitted for a corporation or	.0502, 607.1508, or 617.1508, Florida Stat rganized under the laws of the State of <u>Per</u> gistered agent, or both, in the State of Flor	nsylvania	-
	he corporation: MINDTECK, INC.	giore on agent, or com, in the chare of 1 to		
	office address: 1828 Good Hope Ro	ad, Suite 201, Enola, PA 17025		
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 02/11/1998	Document number: F980000008	824	
	street address of the current register tment of State: (If resigned, enter res	red agent and registered office on file with tigged)	the	
	C T Corporation System			
	1200 South Pine Island Road			
	Plantation, FL 33324		*	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				SECRETA ALLAHA
	Corporation Service Company		2 PH	SSEE
	1201 Hays Street		.; .≍	
	P.O. Box Tallahassee	NOT acceptable FL 32301	= ;	RATE DE
The street addre	ss of its registered office and the str be identical.	reet address of the business office of its re	gistered age	nt,
Such change wa authorized by the	s authorized by resolution duly adopte board, or the corporation has been	pted by its board of directors or by an offinotified in writing of the change.	cer so	
D		Dona Priebe, Vice President		_
I further agree to performance of agent. Or, if this hereby confirm	the appointment as registered agent o comply with the provisions of all i my duties, and I am familiar with ar	statutes relative to the proper and comple nd accept the obligation of my position as reflect a change in the registered office a	registered	
By: Sedent	august	Septmeber 19th 2014		_
U	nature of Registered Agent half of an entity:	Date		
	, 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

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