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(Requestor's Name)		
(Address)	70035333	
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(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL	10/07/2001019	
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: October 5, 2020

Order#: 443130-017

Re: CENTER FOR COMPREHENSIVE 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: Erika Zavala Daza 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	inge is submitted for a corporation	\$17.0502, 607.1508, or 617.1508, Florida Statutes, to organized under the laws of the State of Laws of the State of Florida.	this
		OMPREHENSIVE SERVICES, INC.	
2. The principal	office address: 313 CONGRESS	ST. 5TH FLOOR, BOSTON, MA 02210	
3. The mailing a	address (if different):	<u> </u>	_
4. Date of incorp	poration/qualification: 11/02/1999	9 Document number: <u>F99000005678</u>	
	d street address of the current regi- ritment of State: (If resigned, enter	stered agent and registered office on file with the resigned)	
	CT CORPORATION SYSTEM		
	C/O CT 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):		red agent (if changed) and /or registered office	- ,
	Corporation Service Company		7.710: 24
	1201 Hays Street		<u> </u>
P.O. Box NOT acceptable			
	Tallahassee	FL 32301	
=		e street address of the business office of its register	
authorized by t	he board, or the corperation has	adopted by its board of directors or by an officer s been notified in writing of the change.	50
	111/11	Gina L. Martin - Secretary	
I hereby accept I further agree of my duties, an document is be corporation ha	to comply with the provisions of	Printed or typed name and title ingent and agree to act in this capacity. all statutes relative to the proper and complete pe the obligation of my position as registered agent, inge in the registered office address, I hereby confir change.	erformanc Or if thi rm that the
<u> </u>	- Y-Kwól	09/29/2020	
Sig	gnature of Registered Agent	Date Date	
	Asst. Vice President Typed or Printed Name	-	

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