F99000000753

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

Office Use Only



400272175594

04/29/15--01017--001 **35.00

SECRETARY OF STATE
DIVISION OF CORPORATION

RARD(M8 10,5,6,15



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscglobal.com

Date: April 27, 2015

Order#: 595260-008

Re: CDI MANAGEMENT CORP.

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: Janis M. Smith

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 change is submitted for a con-	7.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this rporation organized under the laws of the State of MN office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: CDI MAN	AGEMENT CORP.	
2. The principal office address: 5775 WAYZATA BOULEVARD SUIT	E 400, ST LOUIS PARK MN 55416	
3. The mailing address (if different):		
4. Date of incorporation/qualification: 12	2/30/1999 Document number: F99000006753	
5. The name and street address of the cur. Florida Department of State: (If resigned)	rent registered agent and registered office on file with the ed, enter resigned)	
NRAI SERVICES, INC.		
1200 SOUTH PINE ISL	AND ROAD	
PLANTATION	FL 33324 ≧ ≤ ✓	
6. The name and street address of the new (if changed):	v registered agent (if changed) and /or registered office	-
Corporation Service Co		יי קר
1201 Hays Street		-
Tallahassee	P.O. Box NOT acceptable FL 32301	
	e and the street address of the business office of its registered agent, on duly adopted by its board of directors or by an officer so ion has been notified in writing of the change.	
Agnature of officer or director	Dona Priebe, Vice President Printed or typed name and title	
I further agree to comply with the provi- performance of my duties, and I am fam	stered agent and agree to act in this capacity. sions of all statutes relative to the proper and complete iliar with and accept the obligation of my position as registered d merely to reflect a change in the registered office address, I been notified in writing of this change.	
By: Signature of Registered Agent	04/21/2015	
If signing on behalf of an entity:		
Sylvia Queppet, Asst. Vice President		
Typed or Printed Name	* FILING FEE: \$35.00 * * *	

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