## L10000074358

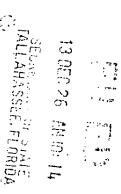
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PICK-UP	☐ WAIT	MAIL
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CSC - WILMINGTON Suite 400 2711 Centerville Road Wilmington De 19808 800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Morgan Kennedy

Date: December 23, 2013

Order#: 919755/220

Re: PHARMANET/I3 STRATEGIC RESOURCING PUERTO RICO, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

▼/ XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Morgan Kennedy

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

0 '	,		
I. Na	me of the limited liability company: PHARMANET/I3	STRATEGIC RESOURCE	NG PUERTO RICO, LLC
2. (a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	: 1001 E. Palm Avenue	
		Tampa	FL 33605
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1 Van De Graaff Drive 6th Floor Burlington, MA 01803	
07/14/	2010	L10000074359	
3. Da	te of filing/registration in Florida	4. Document number	
5. (a)	Registered Agent and Registered Office shown on	the records of the Florida	a Dept. of State:
	Registered Agent:	C T Corporation System	
	Registered Office Address:	1200 S. Pine Island	
		Plantation	FL 33324
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office ad	dress D
	<u><b>NEW</b></u> Registered Agent:	Corporation Service Corr	npany 💸 🚎
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street	77 c 200 000
		Tallahassee	□;,FL32301
confir and th liabili the me the op	limited liability company is not organized under the med that after the change or changes are made, the F e business office of the registered agent will be idently company, it is hereby confirmed that the change(s) embers of the limited liability company or as otherwiserating agreement of the limited liability company.	lorida street address of thical. Or, in the case of a	ne registered office Florida limited
	re of a member or authorized representative of a member	_	
Dona	Priebe, Authorized Person or typed name of signee	_	
I here compl and I Chapt addre By:	eby accept the appointment as registered agent and a with the provisions of all statutes relative to the prame familiar with and accept the obligations of my part of the construction of this document is being filed to me ss. I hereby confirm that the limited liability company		
Signatu	fe of Registered Agent Corporation Service Company	Sylvia Queppet, Assista	int vice President

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00