

11/16/2017

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19542080845 Grant Ranae McGraw

Division of Corporations

Florida Department of State
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LLC REGISTERED AGENT CHANGE
OPTIMAL RESEARCH, LLC

Certificate of Status	0
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S. WARREN

NOV 17 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: OPTIMAL RESEARCH, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Hank Gerock

Name of Person

PPD Development, L.P.

Firm/Company

929 North Front Street

Address

Wilmington, NC 28401

City/State and Zip Code

hank.gerock@ppdi.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Hank Gerock

at (910)

558-2902

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

LNHS18 (2/14)

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

1. Name of the limited liability company: OPTIMAL RESEARCH, LLC

2. (a)	15201 Shady Grove Road	(b)	15201 Shady Grove Road
	Principal office address of limited liability company:		Mailing address of limited liability company:
	(Note: <u>MUST BE STREET ADDRESS</u>)		(Note: <u>MAY BE POST OFFICE BOX</u>)
	Suite 202		Suite 202
	ROCKVILLE, MD 20850		ROCKVILLE, MD 20850
	11/13/2014		M14000008214

3. Date of filing/registration in Florida 4. Document number

5. (a) _____
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Rokoff, Norma

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

3030 Venture Lane, Suite 101

Melbourne

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

C T Corporation System

NEW Registered Office Address:

1200 South Pine Island Road

Plantation FL 33324

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

B. Judd Hartman Authorized person

Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

By: CT Corporation System James M. Halpin Assistant Secretary
Signature of Registered Agent

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

INHS18 (2/14)