P07000127349

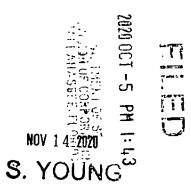
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COVER LETTER

то:	Amendment Section Division of Corporations	
SUBJ	ECT: PROGRESSIVE BEHAVIORAL SC of Corporation	IENCE, INC.
Name	of Corporation	
DOC	UMENT NUMBER: P07000127349	
The er	nclosed Statement of Change of Register	ed Office/Agent and fee are submitted for tiling.
Please	return all correspondence concerning th	is matter to the following:
Katie	Buster	
Name	of Contact Person	
Husch	Blackwell LLP	
Firm/C	Company	
111 C	ongress Avenue, Suite 1400	
Addre	ss	
Austin	a, Texas 78701	
City/S	tate and Zip Code	
	Jonathon@CultivateBHE.co	om
E-mai	il address: (to be used for future annu	al report notification)
For fu	rther information concerning this matter.	. please call:
Katie I		at (512) 479-9775 Area Code & Daytime Telephone Number
	Name of Contact Person	Area Code & Daytime Telephone Number
Enclos	sed is a \$35.00 check made payable to th	e Department of State.
	Mailing Address: Amendment Section	Street Address:
		Amendment Section
	Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	rananassee, 145 J2J14	Tallahassee, FL 32303

CR2E045 (04/13)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	unge is submitted for a corporatio	617.0502, 607.1508, or 617.1508. Floria on organized under the laws of the State o or registered agent, or both, in the State o	of <u>Florida</u>
1. The name of t	the corporation: PROGRESS	IVE BEHAVIORAL SCIENCE, INC.	
3. The mailing a	nddress (if different): 3595 Ranch	Road 620 South, Suite 220, Bee Cave,	Texas 78738
4. Date of incorp	poration/qualification:11/26/2	2007 Document number: P0'	7000127349
	d street address of the current regi rtment of State: (If resigned, enter	istered agent and registered office on file r resigned)	with the
	ARIZMENDI, MARIA	-	
	3520 OAKS WAY, #904		
	POMPANO BEACH, FL 3300	69	
6. The name and (if changed):	d street address of the new registe	ered agent (if changed) and /or registered	2020 OCT -5 PM
	C T Corpor	ation System	
	1200 South Pine Island F	Road, Plantation, Florida 33324 P.O. Box NOT acceptable	— 1: 1.3
The street addre	ess of its registered office and the be identical.	e street address of the business office o	fits registered agent,
Such change wa authori zed by t h	as authorized by resolution duly he board, or the corporation has	adopted by its board of directors or by been notified in writing of the change.	an officer so
Jeron	ne Mee	Jerome Mee, C	EO
I hereby accept I further agree to of my duties, and document is beil corporation has	the appointment as registered a the appointment as registered a to comply with the provisions of all am familiar with and accept ing filed merely to reflect a chans been notified in writing of this a chans.	Printed or typed name an igent and agree to act in this capacity. all statutes relative to the proper and cathe obligation of my position as registed in the registered office address. They are the registered office address.	d title
Signature of Registered Agent Date			
_	chalf of an entity:	,,	
	Assistant Secretary yped or Printed Name		
	" " " FIL!	ING FEE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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