## P08000072557

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
(6.1), 6.10.0 1,				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
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TALLAHASSELLE

OCT 07 2019



CSC - WILMINGTON 251 Little Falls Drive Wilmington De 1980S

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Soraya Sariaslani soraya.sariaslani@cscglobal.com

Date: September 17, 2019

Order#: 873454/038

Re: PROGRAM MANAGEMENT SERVICES, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

 $\frac{XX}{XX}$  File in your office on a routine basis.  $\frac{XX}{XX}$  Issue Proof of Filing.

MX Return Regular Mail in the enclosed envelope.

Attn:Soraya Sariaslani c/o Corporation Service Company 251 Little Falls Drive

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 ( $\tt BOTH\ FOR\ CORPORATIONS$

statement of ci	hange is submitted for a corp	oration organized under the laws of the State of	FL	, <i>D</i> :
		ffice or registered agent, or both, in the State of	Florida,	
		M MANAGEMENT SERVICES, INC.		
2. The principa	al office address: 655 N. FRA	ANKLIN ST. Suite 1900 Tampa, FL 33602	<del>-</del>	
3. The mailing	address (if different): 220 S	. Ridgewood Ave. Daytona Beach, FL 32114		
4. Date of inco	orporation/qualification: 08/0	04/2008 Document number: P08000	072557	
	nd street address of the current artment of State: (If resigned	nt registered agent and registered office on file w , enter resigned)	ith the	
	C T CORPORATION SYS	STEM		
	1200 SOUTH PINE ISLAN	ND ROAD	₩. S	201
	PLANTATION, FL 33324		ALL.	2019 SEP 18
6. The name ar (if changed)	nd street address of the new r	egistered agent (if changed) and /or registered of	AHA Tice St	
	Corporation Service Com			AH 9: 00
	1201 Hays Street		. 13	ö
P.O. Box NOT acceptable				
	Tallahassee	FL 32301		
The street add as changed wi	ress of its registered office a Il be identical.	and the street address of the business office of it	s registe	red ag
Such change v authorized by	vas authorized by resolution the board, or the corporation	duly adopted by its board of directors or by an a has been notified in writing of the change.	officer s	0
	Site & COMI Late of an officer or director	Jill Cilmi, Vice President		
Signa	tufe of an officer or director	Printed or typed name and titl	ie	
I jurther agree performance o agent. Or, if i hereby confirn	t to comply with the provision of my duties, and I am familia his document is being filed n	red agent and agree to act in this capacity, ons of all statutes relative to the proper and com ar with and accept the obligation of my position nerely to reflect a change in the registered officen notified in writing of this change.	plete i as regi: e addres	stered ss. I
By: χ) <sub>ν</sub>	grature of Registered Agent	09/16/2019		
Si	gnature of Registered Agent	Date		
If signing on b	ehalf of an entity:			
Grace E. Kirby	, Assistant Vice President			
	Typed or Printed Name	<del></del>		

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