P10000041184

(Requestor's Name)					
(Address)					
(Address)					
	City/State/Zip/Phone #)					
PICK-UP	WAIT MAIL					
	(Business Entity Name)					
(Document Number)						
Certified Copies	Certificates of Status					
Special Instructions	to Filing Officer:					

Office Use Only



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12/26/13--01030--015 **25.00

01/22/14--01017--002 **10.00

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SECKE LARY UP STAND



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#: 919755/216

Re: PHARMANET/I3 STRATEGIC RESOURCING CANADA, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

 \overline{XX} Check in the amount of \$35.00.

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

FILED

GRETARY OF SIGHE
PLANASSEE, FLORIDA



January 2, 2014

MORGAN KENNEDY CORPORATION SERVICE COMPANY 2711 CENTERVILLE ROAD, SUITE 400 WILMINGTON, DE 19808

SUBJECT: PHARMANET/I3 STRATEGIC RESOURCING CANADA, INC.

Ref. Number: P10000041184

We have received your document for PHARMANET/I3 STRATEGIC RESOURCING CANADA, INC. and your check(s) totaling \$25.00. However, the document has not been filed and is being retained in this office for the following:

The filing fee for a registered agent change on a corporation is \$35.00. So therefore, we need an additional \$10.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 614A00000073

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

statement of cha	provisions of sections 607.0302, 61 inge is submitted for a corporation r to change its registered office or i	organized under the la	ws of the State o	f_Florida
	the corporation: PHARMANET/I3 S			
2. The principal	office address: 1001 E. Palm Aver	nue, Tampa, FL 3360	5	
3. The mailing a	ddress (if different): 1 Van De Gra	aaff Drive, 6th Floor, Bu	urlington, MA 01	803
4. Date of incorp	number: P1000	10041184		
	I street address of the current registed tment of State: (If resigned, enter re		ed office on file	with the
	C T Corporation System			_
	1200 S. Pine Island Road			_
	Plantation	FL	33324	TALE 14
6. The name and (if changed):	street address of the new registere	d agent (if changed) an	nd /or registered o	ALLANIS OFFICE AREA ALLANIS SECRETARIAS SE
	Corporation Service Company			_ 3 3 111
	1201 Hays Street			_
		ox NOT acceptable	22204	
	Tallahassee		32301	_
The street address changed will	ess of its registered office and the s be identical.	street address of the bu	isiness office of	its registered agent,
Such change wa authorized by th	as authorized by resolution duly ad ne board, or the corporation has be	opted by its board of c en notified in writing c	directors or by an of the change.	1 officer so
Signatu	re of an officer of director	Dona Priebe, V	Vice President	litle
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered age to comply with the provisions of all my duties, and I am familiar with is document is being filed merely that the corporation has been noting Service Company	nt and agree to act in I statutes relative to th and accept the obligat o reflect a change in t	this capacity. ne proper and co tion of my position he registered off	mplete on as registered
By: Like	augget	12/16/2013		
	nature of Registered Agent		Date	
If signing on be	half of an entity:			
	, Assistant Vice President			
T)	yped or Printed Name			

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

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

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

statement of cha	provisions of sections 607.0502. inge is submitted for a corporati r to change its registered office	on organized under the	laws of the	State of <u>F</u>	lorida	his 	-
	the corporation: PHARMANET/						
2. The principal	office address: 1001 E. Palm A	venue, Tampa, FL 336	605				
	N						
3. The mailing a	address (if different): 1 Van De	Graaff Drive, 6th Floor,	Burlington,	MA 0180	3		
4. Date of incorp	poration/qualification: 05/12/20	10 Docume	nt number:	P1000004	41184		
	I street address of the current reg rtment of State: (If resigned, enter		ered office of	on file with	h the		
	C T Corporation System						
	1200 S. Pine Island Road			,a.			
	Plantation	F	L 33324		SEC	14.	
6. The name and (if changed):	l street address of the new regist	ered agent (if changed)	and /or regis	stered offic	AH TANK	91 NW 7	
	Corporation Service Company				77	PH 1:	
	1201 Hays Street					1: 51	
	P.C Tallahassee	D. Box NOT acceptable	L 32301		2	-	
	ess of its registered office and the identical.	ne street address of the	business of				nt,
Such change was authorized by the	as authorized by resolution duly ne board, or the corporation has	adopted by its board o been notified in writin	of directors of g of the cha	or by an of nge.	ficer so		
Ciobatu	re of an officer or director	Dona Priebe	e, Vice Presi				-
I hereby accept I further agree of performance of agent. Or, if the hereby confirm	the appointment as registered a to comply with the provisions of my duties, and I am familiar with a document is being filed mere that the corporation has been not Service Company	agent and agree to act f all statutes relative to ith and accept the oblig ly to reflect a change i	in this capa the proper gation of my the registe	city. and compl position a	as regist	ered , I	
By: Juni	nature of Registered Agent	12/16/2013	Phot-				-
U	half of an entity:		Date				
Sylvia Queppet	, Assistant Vice President						
. Tr	yped or Printed Name	_					

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