P1000051661

(Requestor's Name)			
(Address)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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T. LEMIEUX



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith jsmith2@cscinfo.com

Date: April 29, 2014

Order#: 080564/045

Re: HAYES LABORATORY SERVICES, INC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35 .

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:Janis M. Smith 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 CORPORATIONS

statement of cha	inge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Florida registered agent, or both, in the State of Florida.	
1. The name of t	he corporation: HAYES LABORA	TORY SERVICES, INC.	
	office address:th Avenue, Suite 1-4, Davie, FL 3	33314	
•	ddress (if different):eral Drive, Suite 100, Greensboro,	NC 27410	
4. Date of incorp	poration/qualification: 06/18/2010	Document number: P10000051661	
	I street address of the current regist tment of State: (If resigned, enter r	tered agent and registered office on file with the resigned)	
	C T Corporation System		
	1200 South Pine Island Road		
	Plantation	FL 33324	
6. The name and (if changed):	street address of the new registere	ed agent (if changed) and /or registered office	
	1201 Hays Street		
	P.O. B	FL 32301 575 -	
The street addre		street address of the business office of its registered agent,	
Such change wa authorized by th	s authorized by resolution duly ac le board, or the corporation has be	dopted by its board of directors or by an officer so een notified in writing of the change.	
	re of all ficer of director	Dona Priebe, Vice President	
I hereby accept I further agree t performance of agent. Or, if thi hereby confirm	the appointment as registered age o comply with the provisions of a my duties, and I am familiar with	Printed or typed name and title ent and agree to act in this capacity. Il statutes relative to the proper and complete and accept the obligation of my position as registered to reflect a change in the registered office address, I ified in writing of this change.	
By: Sign	nature of Registered Agent	April 29, 2014 Date	
_	half of an entity:		
Grace E. Kirby,	Assistant VP		
Ty	ped or Printed Name		

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