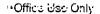
## P106/3

(Re	equestor's Name)			
. (Ad	ldress)			
(Ad	Idress)			
(Ci	ty/State/Zip/Phon	o #0		
(Oil	ty/Otate/Zip/i flori	c <del>n</del> ,		
PICK-UP	MAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Do	cument Number)			
(20	odinom Hamber,			
Certified Copies Certificates of Status				
Special Instructions to	Filing Officer:			
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SCORE CO.

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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: November 5, 2014

Order#: 359183-002

Re: LEMESSURIER CONSULTANTS INC.

Enclosed please find:

XX Change of Registered Agent and Office.

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 Please return evidence to the following:

Attn: Morgan Kennedy

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

OUCA.XCOA

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

statement of cha	provisions of sections 607.0502, 617.05 ange is submitted for a corporation orgo r to change its registered office or regis	anized under the la	rws of the State of	MA
1. The name of	the corporation: LEMESSURIER CONS	SULTANTS INC.		
	office address: ERS FIELD ROAD, BOSTON, MA 021	135		
3. The mailing a	ddress (if different):			<del>_</del>
4. Date of incorp	poration/qualification: 06/30/1986	Document	number: P10613	
	I street address of the current registered tment of State: (If resigned, enter resigned)		ed office on file w	vith the
	NRAI SERVICES, INC.			_
	1200 SOUTH PINE ISLAND ROAD			
	Plantation	FL	33311	
6. The name and (if changed):	I street address of the new registered ag	ent (if changed) ar	nd /or registered of	
	Corporation Service Company	<u> </u>	<del></del>	
	1201 Hays Street			
		OT acceptable	00004	
	Tallahassee		32301	
The street addre	ess of its registered office and the stree be identical.	t address of the bu	isiness office of it	ts registered agent,
Such change wa authorized by th	as authorized by resolution duly adopte the board, or the corporation has been n	ed by its board of cotified in writing of	directors or by an of the change.	officer so
	28	Dona Priebe		Vice President
-	re of an officer or director		ed or typed name and tit	le
I further agree to performance of agent. Or, if this hereby confirm.	the appointment as registered agent a to comply with the provisions of all sta my duties, and I am familiar with and is document is being filed merely to rej that the corporation has been notified n Service Company	tutes relative to th accept the obligat	ne proper and con tion of my position	n as registered
By: メンハ	nature of Registered Agent	11/05/2014		
Sign	nature of Registered Agent		Date	
If signing on bel	half of an entity:			
Grace E. Kirby,	Asst. Vice President			
Ty	ped or Printed Name			

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