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(Re	questor's Name)			
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(Business Entity Name)				
(Document Number)				
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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Anthony Arthur anthony.arthur@cscglobal.com

Date: August 17, 2018

Order#: 342712/004

Re: IMAGINA HR 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:Anthony Arthur 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 OR BOTH FOR CORPORATIONS

statement of cha	ange is submitted for a corporatio	617,0502, 607.1508, or 617.1508, Florida Stat on organized under the laws of the State of <mark>FLC</mark> or registered agent, or both, in the State of Flor	DRIDA
1. The name of	the corporation: MAGINA HR SE	ERVICES, INC.	
	1 STREET MIAMIEL 33166		
3. The mailing a			
4. Date of incor	poration/qualification: 01/27/201	Document number: P140000084	422
	d street address of the current regi rtment of State: (If resigned, enter	istered agent and registered office on file with t r resigned)	he
	CORPORATION COMPANY O	F MIAMI	
	201 S. BISCAYNE BLVD		(0) 53
	MIAMI	FL 33131	1018 A
6. The name and (if changed):	d street address of the new registe		•
	Corporation Service Company	L1	
	1201 Hays Street	ا الله الله الله الله الله الله الله ال	3: 60 STATE
	PO	Box NOT acceptable	. –
	Tallahassee	FL 32301	
The street address changed will	ess of its registered office and the local be	e street address of the business office of its re	gistered agent,
Such change was authorized by the	as authorized by resolution duly he board, or the corporation has b	adopted by its board of directors or by an office been notified in writing of the change.	cer so
Xiee d	9 agric	Jill Cilmi, Vice President	
Signati	are of an officer or director	Printed or typed name and title	-
I further agree performance of agent. Or, if th hereby confirm	to comply with the provisions of my duties, and Lam familiar wit	gent and agree to act in this capacity. all statutes relative to the proper and complet th and accept the obligation of my position as y to reflect a change in the registered office ac otified in writing of this change.	realterea
By: $\chi \chi_{\lambda}$	oco Letyble Inature of Registered Agent	08/17/2018	
Sig	nature of Registered Agent	Date	
If signing on be	chalf of an entity:		
Grace E. Kirby	, Assistant Vice President		
т	yped or Printed Name	-	

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