

P34159

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

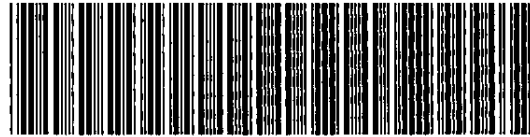
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600185656756

10/04/10--01027--003 **35.00

RA Kelly

FILED
10 OCT -4 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Roberts OCT 06 2010

NewCo Corporate Services, Inc.

875 Avenue of the Americas
Suite 501
New York, NY 10001

Telephone: (212) 356-8351

Internet Address: theresa@newcocorporate.com

Fax: (212) 356-8352

September 23, 2010

Florida Dept. Of State
Corporations Division
P.O. Box 6327
Tallahassee, FL 32314

RE: ADP, INC.

Dear Sir/Madam:

Enclosed please find Statement of Change of Registered Office or Registered Agent or Both.
Please file the attached and return a filed-stamped copy to the attention of the undersigned at the
above address.

If there is a problem, please contact the undersigned immediately at the following toll-free
number 1-888-336-3926.

Thanking you in advance for your prompt attention to this matter.

Sincerely yours,



Theresa Festa
Senior Corporate Specialist

Check # - 32258

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Delaware in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: A D Processing, Inc.
2. The principal office address: One ADP Blvd., Roseland, NJ 07068
3. The mailing address (if different): _____
4. Date of incorporation/qualification: June 3, 1991 Document number: P34159
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

C T CORPORATION SYSTEM

1200 South Pine Island Road

Plantation, FL 33324

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

NRAI Services, Inc.


2731 Executive Park Drive, Suite 4

(P.O. Box NOT acceptable)

Weston, FL 33331

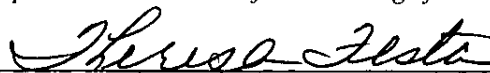
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


(Signature of an officer or director)

Bruce C. Wechsler, Asst. Secty
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


(Signature of Registered Agent)

9/30/2015
(Date)

If signing on behalf of an entity:

Theresa Festa, Asst. Secty.
(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

FILED
10 OCT - 4 PM 3:00
TALLAHASSEE, FLORIDA
SECRETARY OF STATE