

F03000004485

Florida Department of State
Division of Corporations
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 JUL 10 PM 3:51

FILED

REGISTERED AGENT CHANGE**TESTAMERICA ENVIRONMENTAL MICROBIOLOGY LABORATORY, Inc.**

RECEIVED

2009 JUL 10 AM 8:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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7/10/09
R. Allen

**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 _____
_____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: TestAmerica Environmental Microbiology Laboratory, Inc.
2. The principal office address: 4101 Shuffel Street, NW
North Canton, OH 44720
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 09/05/2003 Document number: F03000004485

5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State: (If resigned, enter resigned)

Keown Nathan
6301 NW5th Way, Suite 2850
Fort Lauderdale, FL 33308

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

CT Corporation System
1200 South Pine Island Road
(P.O. Box NOT acceptable)
Plantation, FL 33324

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.

Rachel Brydon Jannetta
(Signature of Registered Agent)

Rachel Brydon Jannetta, CEO & Sec
(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]
(Signature of Registered Agent)

7/9/09
(Date)

If signing on behalf of an entity:

(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)

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