F0300004760

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
(Oity/Otate/Zip/Filone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Buomoso Enat, Hame)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



100168073141

02/09/10--01010--023 **70.00

AND
FILED
10 FEB -9 PH 3: 42
SECRETARY OF STATE

0/2/20

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

statement of change is su	bmitted for a corporation organi	2, 607.1508, or 617.1508, Florida Statutes, this ized under the laws of the State of Delaware red agent, or both, in the State of Florida.
1. The name of the corpo	ration:	SAFC Biosciences, Inc.
2. The principal office ac	ldress: 11296 Renner Blvd., Lene	xa, KS 66219
3. The mailing address (i	f different): 3050 Spruce Stree	t, ST. Louis, MO 63103
4. Date of incorporation/	qualification: 09/24/03	Document number: F0300004760
5. The name and street as Florida Department of		gent and registered office on file with the
CTC	orporation System	
1200 South Pine Island Road		
Planta	ation, FL 33324	- Control of the cont
6. The name and street at (if changed):	ddress of the new registered agen	t (if changed) and /or registered office
NRA	l Services, Inc.	
Wes	ton, FL 33331	
The street address of its as changed will be ident	registered office and the street a	address of the business office of its registered agent,
Such change was author authorized by the board	rized by resolution duly adopted, or the corporation has been no	by its board of directors or by an officer so tified in writing of the change.
Cathi Q U (Signature of an or	heer or director)	Cathi J. Wall, Assistant Secretary (Printed or typed name and title)
I hereby accept the appl I further agree to compl of my duties, and I am f document is being filed corporation has been no	ointment as registered agent and	d agree to act in this capacity. utes relative to the proper and complete performance gation of my position as registered agent. Or, if this e registered office address, I hereby confirm that the
If signing on behalf of a		

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

Sean L. Emerick, Assistant Secretary
(Typed or Printed Name)