

F22 00003316

Florida Department of State
Division of Corporations
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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REGISTERED AGENT CHANGE BIARRI USA, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$43.75

J. HORNE

SEP 25 2023

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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 California in order to change its registered office or registered agent, or both, in the State of Florida

- 1. The name of the corporation: Biarr USA, Inc
2. The principal office address: 11400 Parkside Dr Ste 300 Knoxville, TN 37934
3. The mailing address (if different):
4. Date of incorporation/qualification: 05/25/2022 Document number: F22000003316
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)

REGISTERED AGENTS INC.
7901 4TH ST N, STE 300
ST PETERSBURG, FL 33702

- 6. The name and street address of the new registered agent (if changed) and/or registered office (if changed):
C T Corporation System
1200 South Pine Island Road
P.O. Box: NOT acceptable
Plantation, Florida 33324

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TALLAHASSEE, FLORIDA

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

DocuSigned by: Ellen Walker-Arnott
Signature of an officer or director
Ellen Walker-Arnott, Authorized Person
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

By: Sherry McGinnes
Signature of Registered Agent
09/21/2023
Date

If signing on behalf of an entity:
Sherry McGinnes, ASSISTANT SECRETARY
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

CR2F045 (04-13)