

L17000261030

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

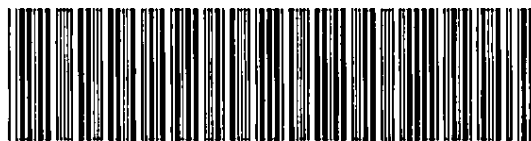
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300293575033

01/25/18--01002--002 \*\*25.00

**FILED**  
18 JAN 17 PM 2:29  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

*N/C*

*01-23-18*

*DC*

taylor | english

Taylor English Duma LLP 1600 Parkwood Circle, Suite 200, Atlanta, Georgia 30339  
Main: 770.434.6868 Fax: 770.434.7376 [taylorenghish.com](http://taylorenghish.com)

January 16, 2018

VIA FEDERAL EXPRESS

Florida Department of State  
Division of Corporations  
**Attn: Darlene Connell**  
2661 Executive Center Circle, W  
Clifton Building  
Tallahassee, Florida 32301

**Re: NH-ISAC Acquisition, LLC to SAFE-BioPharma Association, LLC**

Dear Darlene:

As per our recent conversation, we have enclosed the following documents regarding the above-referenced name change:

1. Our firm check in the amount of \$25.00;
2. Articles of Amendment to Articles of Organization.

Please don't hesitate to contact me or my assistant, Pam Jones, should you have any questions or require additional information.

Thank you for all of your assistance.

Sincerely,



Jeff D. Woodward  
[jwoodward@taylorenghish.com](mailto:jwoodward@taylorenghish.com)  
TAYLOR ENGLISH DUMA LLP

JW/pbj  
Enclosures

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED  
18 JAN 17 PM 2:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NH-ISAC Acquisition, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 12/22/17 and assigned Florida document number L17000261030.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

SAFE-BioPharma Association, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: \_\_\_\_\_

**(Principal office address MUST BE A STREET ADDRESS)** \_\_\_\_\_

Enter new mailing address, if applicable: \_\_\_\_\_

**(Mailing address MAY BE A POST OFFICE BOX)** \_\_\_\_\_

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

*Enter Florida street address*

\_\_\_\_\_, Florida \_\_\_\_\_

*City*

*Zip Code*

**New Registered Agent's Signature, if changing Registered Agent:**

*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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

\_\_\_\_\_  
If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

