## F04000000756

| (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



500135648315



DEPARTIMATION STATE
DIVISION OF COMPORATIONS
TALLAHASSEE, FLORIDA

RECEIVED





C

| ORPORATION SERVICE COMPANY: ACCOUNT NO. : 072100000032 |  |  |
|--|--|--|
| REFERENCE : 717268 7655393                             |  |  |
| AUTHORIZATION: Spelle man                              |  |  |
| COST LIMIT : \$ 35.00                                  |  |  |
| ORDER DATE : September 10, 2008                        |  |  |
| ORDER TIME : 9:19 AM                                   |  |  |
| ORDER NO. : 717268-005                                 |  |  |
| CUSTOMER NO: 7655393                                   |  |  |
|  |  |  |
| CHANGE OF AGENT  |  |  |
|  |  |  |
| NAME: BOSTWICK LABORATORIES, INC.                      |  |  |
|  |  |  |
|  |  |  |
| PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:        |  |  |
| XX PLAIN STAMPED COPY                                  |  |  |
|  |  |  |
| CONTACT PERSON: Cindy Harris                           |  |  |
| EXAMINER'S INITIALS:                                   |  |  |
|  |  |  |

!

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

| Pursuant to the provisions of sections 607.0502, 617.0502 statement of change is submitted for a corporation organi in order to change its registered office or register.   | zed under the laws of the State of Nevada                                     |
|---|---|
| 1. The name of the corporation: BOSTWICK LABO   | ORATORIES, INC.   |
| 2. The principal office address:  4355 Innslake Drive, Glen Allen, VA 23  | 060   |
| 3. The mailing address (if different):  |   |
| 4. Date of incorporation/qualification: 02/10/2004  | Document number:F0400000756   |
| 5. The name and street address of the current registered ag Florida Department of State:  | ent and registered office on file with the                                    |
| C T Corporation System  |   |
| 1200 S. Pine Island Road  | THE T   |
| Plantation, FL 33324  |   |
| 6. The name and street address of the new registered agent (if changed):  | (if changed) and /or registered office  |
| Corporation Service Company   |   |
| 1201 Hays Street  |   |
| (P.O. Box NOT acceptable)   |   |
| Tallahassee, FL 32301   |   |
| The street address of its registered office and the street as changed will be identical.  | address of the business office of its registered agent,                       |
| Such change was authorized by resolution duly adopted authorized by the board, or the corporation has been not  | by its board of directors or by an officer so ified in writing of the change. |
| Anthe Sotte   | Kathy L. Yetter, Attorney in Fact (Printed or typed name and title)           |
| I hereby accept the appointment as registered agent and I further agree to comply with the provisions of all statu of my duties, and I am familiar with and accept the oblig document is being filed merely to reflect a change in the corporation has been notified in writing of this change. | · · · · · · · · · · · · · · · · · · ·   |
| By: Corporation Service Company   | 09/09/2008  |
| (Signature of Registered Agent)   | (Date)  |
| If signing on behalf of an entity:  |   |
| Sylvia Queppet, Asst. VP  |   |
| (Typed or Printed Name)  * * * FILING FEI   | E: \$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)