

**F04 000605100**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H15000235482 3)))



H150002354823ABC1

**Note: DO NOT** hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (350) 617-6380

From: Accounts Name : NRI SERVICES, LLC  
Account Number : 120080000104  
Phone : (302) 674-4089  
Fax Number : (302) 674-5266

2015 OCT 15 AM 9:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: MBROWN@hdsi.com

**REGISTERED AGENT CHANGE  
ARIUS PHARMACEUTICALS, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$43.75

RECEIVED  
15 OCT 15 AM 4:05

OCT-16 2014

**C. CARROTHERS**

Electronic Filing Menu

Corporate Filing Menu

Help

H15000235482 3

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

1. The name of the corporation: Arius Pharmaceuticals, Inc.
2. The principal office address: 4131 ParkLake Ave. Suite 225 Raleigh, NC 27612
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 8/4/2004 Document number: F04000005100
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)

Ernest De Paolantonio324 S Hyde Park Ave. Suite 350Tampa, FL 33606

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

NRAI Services, Inc.12100 South Pine Island RoadP.O. Box NOT acceptablePlantation, Florida 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.


  
Signature of an officer or director

Ernest De Paolantonio, CEOPrinted 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.

NRAI Services, Inc.By: Signature of Registered Agent10/1/15  
Date

If signing on behalf of an entity:

  
Path Gatto  
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 (03/12)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2015 OCT 15 AM 9:55

FILED