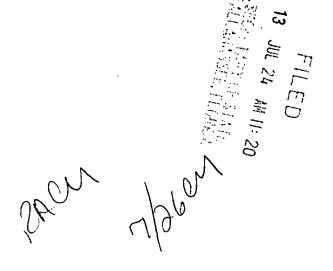


(Requestor's Name)		
(Address)		
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(Address)		
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
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(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ellen Rosaio erosaio@cscinfo.com

Date: July 22, 2013

Order#: 720535-022

Re: HARLAN LABORATORIES, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.

Please take the following action:

XX File in your office on a routine basis.

XX ___ Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ellen Rosaio

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX __ Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of change is submitted for a corporation organ	nized under the laws of the State of Indiana		
in order to change its registered office or regist			
1. The name of the corporation: HARLAN LABORATOR	ILES, INC.		
2. The principal office address: 8105 Krauss Road, Suite	e 105, Tampa, FL 33619		
3. The mailing address (if different):			
4. Date of incorporation/qualification: 10/04/2005	Document number: F05000005714		
5. The name and street address of the current registered a Florida Department of State: (If resigned, enter resigned)			
C T Corporation System	C T Corporation System		
1200 South Pine Island Road	1200 South Pine Island Road		
Plantation, FL 33324	Plantation, FL 33324		
6. The name and street address of the new registered age (if changed): Corporation Service Company	ent (if changed) and /or registered office		
1201 Hays Street			
P.O. Box NO	Γ 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 no	d by its board of directors or by an officer so tified in writing of the change.		
	Dona Priebe, Vice President		
I hereby accept the appointment as registered agent an I further agree to comply with the provisions of all stat performance of my duties, and I am familiar with and agent. Or, if this document is being filed merely to refl hereby confirm that the corporation has been notified in Corporation Service Company			
Signatule of Registered Agent	07/08/2013 Date		
If signing on behalf of an entity:			
Grace E. Kirby, Assistant Vice President			
Typed or Printed Name			
* * * FILING FE	CE: \$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314