

FD60000003314

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

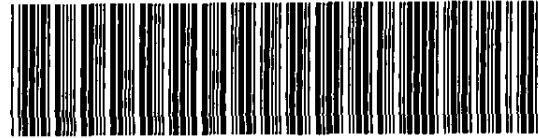
(Document Number)

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FILED
06 JUL -6 PM 12:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA chg.
S



June 26th 2006

Amendment Section
Florida State Division of Corporations
Attention: Ms. Susan Payne
P.O. Box 6327
Tallahassee, Florida 32314

Dear Ms. Payne:

Reference: RxCera Pharmaceutical, Inc - Change of Registered Agent (F06000003314)

Further to our recent conversation I have included the correct forms in order to change our Registered Agent.

Thank you very much for your assistance in this matter.

Respectfully

A handwritten signature in dark ink, appearing to be "James Morrell", written over a horizontal line.

James Morrell
Cc: M. Haas, C. Cave

RECEIVED
JUL -6 AM 8:00
DIVISION OF CORPORATIONS

600 S. Andrews Avenue, Suite 200B
Fort Lauderdale, Florida 33301
Tel: 1-888-4 RXCERA • 954-495-2020
Fax: 954-522-3283 • www.rxcera.com

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: RxCera Pharmaceutical, Inc.
(Name of Corporation)

DOCUMENT NUMBER: F06000003314

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

James Morrell
(Name of Contact Person)

(Firm/Company)

600 S. Andrews Ave, Suite 200B
(Address)

Fort Lauderdale Florida 33301
(City/State and Zip Code)

For further information concerning this matter, please call:

James Morrell at (954) 495-2020
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

1. The name of the corporation: RxCera Pharmaceutical, Inc.
2. The principal office address: 600 S. Andrews Ave, Suite 200B
Fort Lauderdale, Florida 33301
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 05/05/2006 Document number: F06000003314
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

James Batterbury

1040 Bayview Dr. Suite 420

Fort Lauderdale, Florida 33304

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

James Morrell

600 S Andrews Ave, Suite 200B

(P.O. Box NOT acceptable)

Fort Lauderdale, Florida 33301

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)

James Morrell, Officer/Director/Secretary

(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.


(Signature of Registered Agent)

June 26, 2006

(Date)

If signing on behalf of an entity:

(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 (8/05)

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TALLAHASSEE, FLORIDA