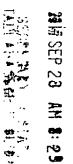
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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM

Account#: I20000000088

Date.
Name: Merritt Knickle
Reference #:C019925
Entity Name: SARTORIUS CORPORATION
Articles of Incorporation/Authorization to Transact Business
☐ Amendment
✓ Change of Agent
Reinstatement
Conversion
☐ Merger
☐ Dissolution/Withdrawal
☐ Fictitous Name
Other
Authorized Amount: \$35.00
Signature: Algust Kuurele

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

	provisions of sections 607.0502. (ange is submitted for a corporatio						
	r to change its registered office o						
1. The name of	the corporation:	SARTOR	IUS CORPO	RATION		<u></u>	
2. The principal	office address:	<u> </u>					
5 Orville Drive			Bohemia	NY	11716		
3. The mailing a	ddress (if different):						
5 Orville Drive			<u>Bohemia</u>	NY _	11716		
4. Date of incorporation/qualification: May 12, 2006 Document number:				F060000	F06000003438		
	i street address of the current regi- tment of State: (If resigned, enter	_	d registered office or	n file with the			
	CORPORATION	SERVIC	COMPANY				
	1201 H	AYS STRI	EET	<u>-</u>			
	TALLAHAS	SEE,, FL	32301				
6. The name and (if changed):	i street address of the new registe	-	anged) and /or regist	ered office	and SEP ?	T1	
	115 North Calhour				28 A	[[]	
P.O. Box NOT acceptable					A	U	
	Tallahassee, FL	32301			1.00		
The street address changed will	ess of its registered office and the be identical.	e street address	of the business offi	ce of its register	red agent,		
Such change was authorized by th	as authorized by resolution duly the board, or the corporation has be	adopted by its l been notified in	poard of directors or writing of the chan	by an officer soge.)		
Sen	Hom		Sean Honan	Assistant Se	cretary		
•	re of an officer or director		Printed or typed nar				
l hirther norse i	the appointment as registered a to comply with the provisions of my duties, and I am familiar wit is document is being filed merely that the corporation has been no	all stabites reli	ative to the proper o	ind complete	tered s, I		
7			9/12/2017				
Sig	nature of Registered Agent		Date				
If signing on be	half of an entity:						

Tim Mayville, Assistant Secretary

Typed or Printed Name

* * * FILING FEE: \$35.00 * * *