

FD9000003300

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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DEPARTMENT OF STATE
16 OCT - 6 AM 10:52
2016 OCT - 6 AM 8:57

OCT - 7 2016

C LEWIS

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 320585 4351084
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 35.00

ORDER DATE : October 5, 2016
ORDER TIME : 8:40 AM
ORDER NO. : 320585-005
CUSTOMER NO: 4351084

CHANGE OF AGENT

NAME: KIVEX BIOTEC, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Courtney Williams

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: KIVEX BIOTEC, INC.

Name of Corporation

DOCUMENT NUMBER: F09000003300

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:

Laurie Merz

Name of Contact Person

The Cooper Companies, Inc.

Firm/Company

6140 Stoneridge Mall Rd., Ste 590

Address

Pleasanton, CA 94588

City/State and Zip Code

rferriter@cooperco.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Laurie Merz

925

460-3677

at ()

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

1. The name of the corporation: KIVEX BIOTEC, INC.
2. The principal office address: 370 Lexington Avenue, Suite 302
New York, NY 10017
3. The mailing address (if different): 6140 Stoneridge Mall Rd., Ste 590
Pleasanton, CA 94588
4. Date of incorporation/qualification: 08/20/2009 Document number: F09000003300
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)

PLATINUM AGENT SERVICES LLC

55 OFFICE PLAZA DR

TALLAHASSEE, FL 32301

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

Corporation Service Company

1201 Hays Street

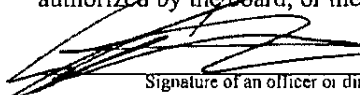
Tallahassee

P.O. Box NOT acceptable

FL 32301

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

Cynthia Wallace - Asst. 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.

Corporation Service Company

By: 

Signature of Registered Agent

10-06-2016

Date

If signing on behalf of an entity:

Courtney Williams, Asst. V.P.

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)

2016 OCT -6 AM 8:57

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS