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Account#: I20000000088

Date:	03/15/2022				
Name:	Merritt Walker	_			
Reference	#:1622038	_			
	e: HALLSTAR BIO	CHEMICA COMPANY			
	cles of Incorporation/Authorization				
☐ Ame	endment				
✓ Cha	nge of Agent				
Reinstatement					
Con	version				
☐ Mer	ger				
☐ Diss	solution/Withdrawal				
☐ Ficti	tious Name				
✓ Othe	erCERTIFIED COF	Y OF THE FILING EVIDENCE			
Authorized	Amount: 43.75				
Signature:	uw				

F: 800.944.6607

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

Pursuant to the provisitatement of change	is submitted for a co	rporation organize	d under the law	s 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: HallStar Biochemica Company								
					-	20		
2. The principal office address.					60606			
3. The mailing addre				 				
4. Date of incorporat	ion/qualification:	03/01/2011	Document n	umber:	F11000	0008	94	_
5. The name and stre Florida Departmen	et address of the cur nt of State: (If resign		nt and registered	d office on file	with the	£	202	
	CT CORPORATION SYSTEM					::.::	2022 HAR	
	1200 SOUTH PINE ISLAND RD					. •	77 15	
	PLANTATION	FL		33324		: - - ;		
6. The name and stre (if changed):	et address of the nev	v registered agent (if changed) and	/or registered	office	(5) (5) (7)	7: 49	
	C	DGENCY GLOE	BAL INC.					
	115 N	orth Calhoun Si	reet, Suite 4					
		P.O. Box NOT acc	aptable					
	Tallaha	ssee	Florida	32301				
The street address of as changed will be id	ientical.						gent,	
Such change was au authorized by the bo	thorized by resolution and, or the comporate	on duly adopted by ion has been notifi	its board of died in writing of	rectors or by a the change.	an officer	80		
Januler)	Marmann)	<u>J</u>	ENNIFER B	AUMANN for typed name and	Secretary			
I hereby accept the a I further agree to co performance of my a agent. Or, if this do hereby confirm that	mply with the provi. Julies, and I am fam	sions of all statutes iliar with and acce	relative to the	e proper and c on of my posit	ton as rev	istered ess, I	d	
Forem lan	Signature of Registered Agent Date			<u> </u>				
Signature If signing on behalf				Date				
Bibiann concaildí	-							
	Printed Name							

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