## F11000001611

(Re	equestor's Name)		
(Ac	ldress)		
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(Ci	ty/State/Zip/Phone	e #)	
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(Bu	usiness Entity Nar	ne)	
(Document Number)			
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AUG 5-70 2015 C. CARROTHERS





CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: August 14, 2015

Order#: 746332-178

Re: BIOMET, 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: Ami Casper

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

Pursuant to the s statement of cha	provisions of sections 607.0502, 617 inge is submitted for a corporation o	7.0502, 607.1508, or 6 organized under the la	17.1508, Florida Statutes, 1954 ws of the State of Indiana	
in orde	r to change its registered office or r	egistered agent, or bot	h, in the State of Floriday 11 A	
1. The name of t	the corporation: BIOMET, INC.			
2. The principal	office address: 56 E. Bell Drive, Wa	ersaw, IN 46582		
3. The mailing a	address (if different): PO Box 587, \	Warsaw, IN 46581		
4. Date of incorp	poration/qualification: 04/13/2011	Document	number: F11000001611	
	I street address of the current registertment of State: (If resigned, enter re		ed office on file with the	
	Corporate Creations Network, Inc.	•		
	11380 Prosperity Farms Road, #2	21E		
	Palm Beach Gardens	FL	33410	
6. The name and (if changed):	d street address of the new registered	d agent (if changed) an	d /or registered office	
	Corporation Service Company			
	1201 Hays Street			
	P.O. Bo. Tallahassee	x NOT acceptable FL	32301	
_			siness office of its registered agent,	
Such change wa authorized by the	as authorized by resolution duly ad- ne board, or the corporation has been	opted by its board of d en notified in writing o	lirectors or by an officer so of the change.	
	Kiduell are of an officer or director	HeatherKie	dwell, Assistant Secretar	rJ
I hereby accept I further agree performance of agent. Or, if th hereby confirm Comporatio	the appointment as registered age. to comply with the provisions of all my duties, and I am familiar with a is document is being filed merely to that the corporation has been notified. Service Company	nt and agree to act in l statutes relative to th statutes relative to the oreflect a change in the fied in writing of this c	this capacity. ne proper and complete non of my position as registered he registered office address, I change.	/
	gnature of Registered Agent	August	14, 2015 Date	
If signing on be	chalf of an entity:			
Sylvia Queppe	t, Asst. Vice President			
7	yped or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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