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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Grace Kirby grace.kirby@cscglobal.com

Date: March 16, 2017

Order#: 553057-010

Re: DNA DIAGNOSTICS CENTER 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: Grace Kirby

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

statement of ch	ange is submitted for a corporation	on organized under the laws of the State of OH or registered agent, or both, in the State of Florida.
1. The name of	the corporation: DNA DIAGNOS	TICS CENTER, INC.
	. Fairfield, OH 45014	
3. The mailing a	address (if different):	
4. Date of incor	poration/qualification: 03/20/20	Document number: F12000001210
	d street address of the current reg rtment of State: (If resigned, ente	istered agent and registered office on file with the resigned)
	C T Corporation System	
	1200 South Pine Island Road	
	Plantation	FL 33324
6. The name and (if changed):	d street address of the new registe	ered agent (if changed) and /or registered office
	Corporation Service Company	
	1201 Hays Street	는 전 등 전 등 전 등 전 등 전 등 전 등 전 등 전 등 전 등 전
	Tallahassee	Box NOT acceptable FL 32301
The street address changed will	ess of its registered office and th	e street address of the business office of its registered agent,
Such change wa	as authorized by resolution duly he board, or the corporation has	adopted by its board of directors or by an officer so been notified in writing of the change.
Xiel		Jill Cilmi, Vice President
I hereby accept I further agree performance of agent. Or, if th hereby confirm	to comply with the provisions of	Printed or typed name and title igent and agree to act in this capacity. all statutes relative to the proper and complete th and accept the obligation of my position as registered by to reflect a change in the registered office address, I otified in writing of this change.
Bv: Y) ~ . 7 - K	March 16, 2017	
	gnature of Registered Agent	Date
0 0	chalf of an entity:	
	, Asst. Vice President Typed or Printed Name	_

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