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Account#: I20000000088

Date: October 19, 2021	Accounts: 12000000000
Name:KEN HOWELL	
Reference #:	
Entity Name: DNA DIAGNOSTICS CENTE	ER, INC.
Articles of Incorporation/Authorization to Transact Busine	ess
Amendment	
✓ Change of Agent	ISSUES? CALL
Reinstatement	KEN:
☐ Conversion	518-213-0738
☐ Merger	
☐ Dissolution/Withdrawal	
☐ Fictitious Name	
Other	
Authorized Amount: \$35-	
Signature:	



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Account#: 120000000088

Date: October	19, 2021		Account#. 12000000000
Name: KEN He	OWELL		
Reference #:	1500526		
Entity Name:	DNA DIA	GNOSTICS CENTE	ER, INC.
Articles of Incorpo	oration/Authoriz	zation to Transact Busine	ess
Amendment			
✓ Change of Agent			ISSUES? CALL
Reinstatement			KEN:
Conversion			518-213-0738
☐ Merger			
☐ Dissolution/Withd	Irawal		
☐ Fictitious Name			
Other			
Authorized Amount:	\$35	-	
Signature:			

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

statement of cha	provisions of sections 607. nge is submitted for a corp	ooration organize	d under the law	s of the State	of C	hio	_
	r 10 change its registered o		a ageni, or boir DIAGNOSTIC				
	he corporation:				χ, πνο.		
2. The principal	office address:		1001 DD	CVVAY	<del></del>		
FAIR	RFIELD, OH 45014						_
3. The mailing a	ddress (if different):	<u> </u>					<del></del>
4. Date of incorp	ooration/qualification:	3/20/2012	Document n	umber:	F12000	00012	10
	street address of the curre tment of State: (If resigned		nt and registered	d office on fil	e with the		
;	CORPOR	ATION SERVI	CE COMPAI	NY	<u> </u>	20:	
:	1	201 HAYS ST	REET		CRE	21 OC 1	<u> </u>
-	TALLAHASSEE	FL		32301		19	etiza etiza etiza
6. The name and (if changed):	street address of the new	registered agent (	if changed) and	l /or registere	d office	Mi 8: 5	4 % ** <del>12*</del> *
	co	GENCY GLO	BAL INC.	<del></del>		57	
	115 No	rth Calhoun S	treet Suite 4	•		•	
	710140	P.O. Box NOT acc			<del></del>		
	Tallahas	see	Florida	32301_	_		
as changed will							ent,
authorized by th	is authorized by resolution to board, or the corporation	n has been notifi	ed in writing of	f the change.	an officer	20	
			Scott Cra	amer For typed name at	Presi	dent	_
I hereby accept I further agree t performance of agent \Or. if thi	the appointment as regist on comply with the provisi my duties, and I am famil s document is being filed that the corporation has l	ered agent and a ons of all statute. iar with and acce merely to reflect been notified in w	gree to act in to s relative to the ept the obligation a change in the criting of this ci	his capacity proper and on of my post e registered c hange		zistered ess. I	
Also	Olh		10/	19/21			
Sign	nature of Registered Agent		/	/ Date			
If signing on bel	half of an entity:						
Sheryl	A. Gibbs, Asst. Sec.						
	ped or Printed Name						

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