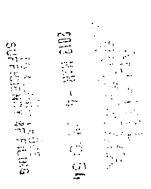
F12000001662

(Red	questor's Name)	
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(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



600244934336



WILL SAME.



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I2000000195

REFERENCE: 546706 7922633

AUTHORIZATION :

COST LIMIT : \$35.00

ORDER DATE: February 25, 2013

ORDER TIME : 3:44 PM

ORDER NO. : 546706-023

CUSTOMER NO: 7922633

CHANGE OF AGENT

NAME: PREDICTIVE BIOSCIENCES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Sarah Wright

EXAMINER'S INITIALS:

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

Pursuant to the provisions of sections 607.0502, 617.0 statement of change is submitted for a corporation org	ganized under the laws of the State of Delaware
in order to change its registered office or reg	·
1. The name of the corporation: PREDICTIVE BIO	SCIENCES, INC
2. The principal office address: 128 Spring St -B, L	_exington, MA-02421
Add	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 04/18/2012	Document number: F12000001662
5. The name and street address of the current registered Florida Department of State: (If resigned, enter resigned)	d agent and registered office on file with the
C T Corporation System	
1200 South Pine Island Road	
Plantation, FL 33324	
The name and street address of the new registered ag (if changed): Corporation Service Company	
 	
1201 Hays Street P.O. Box N	OT acceptable
Tallahassee, FL 32301	
The street address of its registered office and the street as changed will be identical.	et address of the business office of its registered agent,
Such change was authorized by resolution duly adopt authorized by the board, or the corporation has been in	ed by its board of directors or by an officer so notified in writing of the change.
but lives	Deb Reeves, Vice President
I hereby accept the appointment as registered agent a little further agree to comply with the provisions of all stoperformance of my duties, and I am familiar with ana agent. Or, if this document is being filed merely to rehereby confirm that the corporation has been notified Corporation Service Company	atutes relative to the proper and complete t accept the obligation of my position as registered effect a change in the registered office address. I
By: Mella No	02/18/2013
Signature of Registered Agent	Date
If signing on behalf of an entity:	
Sarah Wright, Asst. Vice President Typed or Printed Name	
•	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)