F120000004693

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PICK-UP WAIT MAIL					
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(Business Entity Name)	—				
, ,					
(Document Number)					
Certified Copies Certificates of Status					
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Special Instructions to Filing Officer:					
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Office Use Only



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09/22/15--01015--007 **35.00

15 SEP 22 PH 12: 5:



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscglobal.com

Date: September 18, 2015

Order#: 780049-003

Re: BDI PHARMA, 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: Janis M. Smith

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

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statement of cha	nge is submitted for a corporat	2, 617.0502, 607.1508, or 617.1508, Florid tion organized under the laws of the State of or registered agent, or both, in the State o	South Carolina
1. The name of t	he corporation: BDI PHARMA,	INC.	
2. The principal			
3. The mailing a	ddress (if different):		
4. Date of incorp	ooration/qualification: 11/19/20	Document number: F1200	0004693
	street address of the current retment of State: (If resigned, ent	gistered agent and registered office on file ter resigned)	with the
	CT Corporation System		
	1200 S Pine Island Road		
	Plantation	FL 33324	- 15
6. The name and (if changed):	street address of the new regis	tered agent (if changed) and /or registered	2
	Corporation Service Company	y	PH 12:
	1201 Hays Street		12: 53
	Tallahassee	O. Box NOT acceptable FL 32301	ω :
	- allariassee	12 32301	_
The street addre as changed will	ess of its registered office and to be identical.	the street address of the business office of	its registered agent,
Such change wa authorized by th	s authorized by resolution duly the board, or the corporation has	y adopted by its board of directors or by a seen notified in writing of the change.	n officer so
		Dona Priebe	Vice President
gnatu	re of a volticer or director	Printed or typed name and	title
I further agree to performance of agent. Or, if this hereby confirm	to comply with the provisions of my duties, and I am familiar w is document is being filed mere	agent and agree to act in this capacity. of all statutes relative to the proper and co with and accept the obligation of my positi ely to reflect a change in the registered of notified in writing of this change.	on as registered
By: Mage	· Yokubie	09/15/2015	
Sign	nature of Registered Agent	Date	
If signing on bel	half of an entity:		
Grace E. Kirby,	Asst. Vice President		
Ty	ped or Printed Name		

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