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7/4/2018

115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 866.625.0838 COGENCYGLOBAL.COM

Account#: 120000000088

Date:	7/4/2018	
Name: N	lerritt Knickle	
Reference #:	C022855	
		RMACEUTICALS, INC.
Articles of	f Incorporation/Authoriz	ration to Transact Business
Amendme	ent	
✓ Change o	f Agent	
Reinstate	ment	
Conversion	on	
Merger		
☐ Dissolutio	on∕Withdrawal	
Fictitous I	Name	
Other		
Authoricad A		
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Signature:	MANK	

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

statement of cha	provisions of sections 607.0502, 617.0502, inge is submitted for a corporation organize r to change its registered office or registere	ed under the laws of the Sta	e of Pennsy		<u>!</u>
1. The name of t	the corporation: SPECIALIZE	ED PHARMACEL	JTICALS	, INC	<u>; </u>
•	office address: th Grady Way, Suite 700	Renton	WA	980)57
_	iddress (if different): uth Grady Way, Suite 700	Renton	WA	98(057
4. Date of incorporation/qualification: September 10, 2013 Document number:			F13000	F13000003941	
	I street address of the current registered age timent of State: (If resigned, enter resigned)		ile with the		
	Corporation Service	ce Company	_		
	1201 Hays \$	Street		20	
	Tallahassee, F	L 32301	ECRE	= =	-7
6. The name and (if changed):	d street address of the new registered agent		HASSEE.FLI	2018 JUL -5 AM 9:	
	115 North Calhoun St., S			<u>. 12</u>	
	Tallahassee, FL 32301	ceptable			
The street addre	ess of its registered office and the street ad be identical.	dress of the business office	of its registe	red age	nt,
	as authorized by resolution duly adopted be board, or the corporation has been notif				
/S/ Makenzie Zuern		Makenzie Zuern	Direct	tor	
1 hereby accept 1 further agree to performance of	the appointment as registered agent and a to comply with the provisions of all statute my duties, and I am familiar with and acc is document is being filed merely to reflect that the corporation has been notified in v	es relative to the proper and ent the obligation of my po	, d complete sition as revi	stered ss, I	
/S/ Tim N		July 3, 2018			_
~	nature of Registered Agent	Date			

Tim Mayville, Assistant Secretary

Typed or Printed Name

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