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	equestor's Name)			
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(Ac	ddress)			
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(Ac	ddress)			
(Ci	ity/State/Zip/Phone #	<u>,</u>		
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(B)	usiness Entity Name) —		
	ocument Number)			
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
	Office Use Only			

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CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

TO: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Zoey Hudson zoey.hudson@cscglobal.com

Date: March 4, 2021

Order#: 677120-010

Re: HERITAGE BIOLOGICS, INC

Enclosed please find:

<u>XX</u> Change of Registered Agent and Office. <u>XX</u> Check in the amount of \$35.00.

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: Zoey Hudson c/o Corporation Service Company 251 Little Falls Drive 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

1. The name of t	ne corporation: HERITAGE BIOLOGICS, INC		
2. The principal	office address:		
255 NW Victoria	Drive Lee's Summit, MO 64086		
3. The mailing a	ldress (if different):		
4. Date of incorp	pration/qualification: 06/03/2016 D	ocument number: F16000	002534
5. The name and	street address of the current registered agent and ment of State: (If resigned, enter resigned)		
	CT CORPORATION SYSTEM		
	1200 SOUTH PINE ISLAND ROAD		
	PLANTATION, FL 33324		· · · · · · · · · · · · · · · · · · ·
6. The name and street address of the new registered agent (if changed) and /or registered offic (if changed):		ice	
	Corporation Service Company		. co '
	1201 Hays Street		
	P.O Box NOT acceptable		·
	Tallahassee	FL 32301	

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

officer or director

Jill Cilmi, Vice President

Printed or typed name and trile

Date

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address. I hereby confirm that the corporation has been notified in writing of this change. Consolution Service Company

02/24/2021

By: Signature of Registered Agent

If signing on behalf of an entity:

Grace E. Kirby, Asst. Vice President

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO; DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)