# F2200005830

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Certified Copies	Certificates	of Status
Special Instructions to F	Filina Officer	
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## **CORPORATE** ACCESS, \_\_\_\_

## When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

### **WALK IN**

		PICK UP:	DANNY 10/13	
	CERTIFIED C	СОРУ		
XX	РНОТОСОРУ			
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XX	FILING	FORE	EIGN INC	
	IELSON BACH CORPORATE NAME A	USA LTD. INC. ND DOCUMENT #)	•	_
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#### **COVER LETTER**

	ent Section Division of Corporati ON BACH USA LTD. INC.	ons	
DOCUMENT NU	F22000005830	e of Corporation	
The enclosed Amo	endment and fee are submitted for	filing.	
Please return all ed	orrespondence concerning this ma	itter to the following:	
Malissa Dani	els		
	Name of Contact Person		
Nutter McCle	nnen & Fish LLP		
	Firm/Company	<del>,</del>	
155 Seaport	Bl∨d.		
	Address	<del></del>	
Boston, MA 0	2210		
	City/State and Zip Code		
mdaniels@nut	ter.com		
E-mail addre	ess: (to be used for future annual r	eport notification)	
For further inform Malissa Dani	ation concerning this matter, please15	se call: 617 43	9-2345
Name	c of Contact Person	at () Area Code & D	Daytime Telephone Number
	k for the following amount:		
\$35 Filing Fee	☐ \$43.75 Filing Fee &	□ \$43.75 Filing I	Fee & S52.50 Filing F
	Certificate of Status	Certified Copy	Certificate of Stat  Certified Copy

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

#### PROFIT CORPORATION

#### APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

#### SECTION 1 (1-3 MUST BE COMPLETED) 202/ (11/13 17/12: 04

F220	000005830		
MELSON BACK HEALTD THE	(Document number of corpor	ration (if known)	
NELSON BACH USA LTD. INC.			
(Name of c Massachusetts			
(Incorporated under	laws of)	(Date authorized to do l	ousiness in Florida)
(4-7	SECTION I COMPLETE ONLY THE APP		
If the amendment changes the name of th incorporation?			its jurisdiction of
(Name of corporation after the amendme not contained in new name of the corporation	ent, adding suffix "corporation," " ation)	company," or "incorporated,"	or appropriate abbreviation.
(If new name is unavailable in Florida, en	nter alternate corporate name adop	sted for the purpose of transac	ting business in Florida)
. If the amendment changes the period	d of duration, indicate new period	of duration.	
	(New duration	n)	
. If the amendment changes the jurisd	liction of incorporation, indicate n	ew jurisdiction.	
	(New jurisdiction	on)	-
If amending the registered agent and/o	or registared office address in Fl	onido ontoritho nomo efekto	
new registered agent and/or the new re	egistered office address:	orida, enter the hame of the	<u>-</u>
Name of New Registered Agent		<del></del>	<del></del>
	(Florida street addre	vss)	
New Registered Office Address:	(Citv)	, Florida_	(Zip Code)
Naw Degistered Agent's Clamaton '5	•		(Zip Code)
New Registered Agent's Signature, if a I hereby accept the appointment as regist	cnanging Registered Agent: tered agent. I am familiar with a	nd accept the obligations of th	ne position.
Signature of New Pearl	stored Agent if changing		
I hereby accept the appointment as regist	tered agent. I am familiar with a stered Agent, if changing	nd accept the obligations of th	he position.

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

• •			
Title Capacity	Name	Address	Type of Action
D, P, S	JANET CARTER-SMITH	21 HIGH St. STE 302	□Add
		NORTH ANDOVER, MA 01845	
			XRemove
P, S	SIMON HODGE	21 HIGH St. STE 302	
,T, D			🖾 Add
		NORTH ANDOVER, MA 01845	
		484 - 13	Remove
			Remove
			Remove
		-	<del></del>
			Remove
10. Attached is a of the applicat under the laws	certificate or document of similar import, evition to the Department of State, by the Secreta s of which it is incorporated.	idencing the amendment, authenticated no ry of State or other official having custody of	t more than 90 days prior to deliver of corporate records in the jurisdiction
	·	— DocuSigned by:	
	(Signature of a direct	Simon Hodge or, president of other officer - if in the hand	s of
	a receiver or other co Simon Hodge	urt appointed fiduciary, by that fiduciary)	o VI
	<u> </u>	CFO (Title of pers	con cianina)
	(Typed or printed name of person signing)	(Title of pers	on signing)

FILING FEE \$35.00