

(Requestor's Name)	
(Address)	7002
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	08/
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
	PAC
	ÁUG 15 2014) R. WHITE

Office Use Only



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Morgan Kennedy

Date: August 4, 2014

Order#: 227025-006

Re: EMSL ANALYTICAL, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

X Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Morgan Kennedy 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

statement of ch	provisions of sections 607.0502, 617.0, ange is submitted for a corporation org er to change its registered office or regi	anized under the la	ws of the State o	of NJ		_
1. The name of	the corporation: EMSL ANALYTICAL, I	INC.	1980 1980 7			
- •	l office address: . 10TH AVE., BAY AN. MIAMI BEACH,	, FL 33179				-
3. The mailing	address (if different):					
4. Date of incorporation/qualification: 01/20/1998 Document number: F98					3	
	d street address of the current registered rtment of State: (If resigned, enter resig		ed office on file	with the	2	
	C T CORPORATION SYSTEM					
	1200 SOUTH PINE ISLAND ROAD			_		
	PLANTATION	FL	33324	_		
6. The name and (if changed):	d street address of the new registered ag	gent (if changed) an	d /or registered	office		
	Corporation Service Company					
	1201 Hays Street				:	r
	P.O. Box No	OT acceptable			, ,	
	Tallahassee	FL	32301			,
The street addr as changed wil	ess of its registered office and the stree l be identical.	et address of the bu	isiness office of	its regi	stered ag	gent,
Such change w authorized by t	as authorized by resolution duly adopt he board, or the corporation has been r	ed by its board of contified in writing of	directors or by a of the change.	n office	er so	
σ	26 2	Dona Priebe, V	ice President			
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered agent a to comply with the provisions of all sta f my duties, and I am familiar with and is document is being filed merely to re that the corporation has been notified on Service Company		ed or typed name and this capacity, ne proper and co ion of my positi he registered of change.		egisterea ress, I	 !
By:	gnature of Registered Agent	08/04/2014	Date		·	_
	chalf of an entity:		Date			
	, Asst. Vice President					
1	yped or Printed Name					
	* * * FILING F	EE: \$35.00 * * *				

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314