

LO20000 34035

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

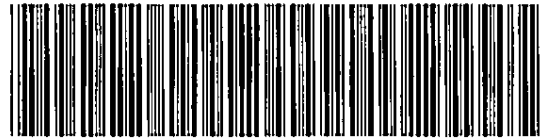
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900342435859

03/23/20--01022--015 \*\*25.00

FILED  
2020 MAR 23 AM 10:12  
SEDA BY MAIL  
FALL ARIZONA COUNTY

RA/RO/chg

APR 07 2020  
I ALBRITTON

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Biorasi, LLC

\_\_\_\_\_  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Brian Chaiken

\_\_\_\_\_  
Name of Person

Biorasi, LLC

\_\_\_\_\_  
Firm/Company

18851 NE 29th Ave., Suite 800

\_\_\_\_\_  
Address

Aventura, FL 33180

\_\_\_\_\_  
City/State and Zip Code

bchaiken@biorasi.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brian Chaiken

786

388.0700

at ( )

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code & Daytime Telephone Number

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

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

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

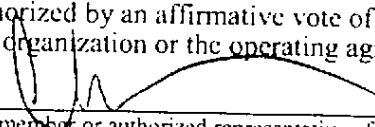
**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR  
LIMITED LIABILITY COMPANY**

*Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

1. Name of the limited liability company: Biorasi, LLC
2. (a) Principal office address of limited liability company:  
*(Note: **MUST BE STREET ADDRESS**)*  
18851 NE 29th Ave., Suite 800  
Aventura, FL 33180
- (b) Mailing address of limited liability company:  
*(Note: **MAY BE POST OFFICE BOX**)*  
18851 NE 29th Ave., Suite 800  
Aventura, FL 33180
3. 12/18/2002 Date of filing/registration in Florida
4. L02000034035 Document number
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
Larisa Reznik  
Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*  
20201 E. Country Club Dr., #2608  
Miami FL 33180
- (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:  
Brian Chaiken  
**NEW Registered Office Address:**  
18851 NE 29th Ave., Suite 800  
Aventura FL 33180

FILED  
2020 MAR 23 AM 10:12  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

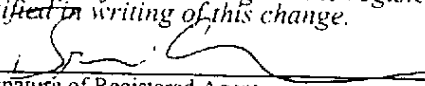
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

  
Signature of a member or authorized representative of a member

Christopher O'Brien

Printed or typed name of signee

*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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

  
Signature of Registered Agent