

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000017731

FILED
Oct 31, 2007
Secretary of State

Entity Name: ST. GEORGE'S LABORATORY, L.C.

Current Principal Place of Business:

1225 TAMIAMI TRAIL B16
PORT CHARLOTTE, FL 33953

New Principal Place of Business:

10218 BAY AVE
ENGLEWOOD, FL 34224

Current Mailing Address:

1225 TAMIAMI TRAIL B16
PORT CHARLOTTE, FL 33953

New Mailing Address:

FEI Number: 16-1697131 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CATTERMOLE, ROBERT K MR
1225 #B16
TAMIAMI TRL
PORT CHARLOTTE, FL 33953 US

Name and Address of New Registered Agent:

CATTERMOLE, ROBERT K MR
10218 BAY AVE
ENGLEWOOD, FL 34224 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ROBERT CATTERMOLE

10/31/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CATTERMOLE, ROBERT K
Address: 10218 BAY AVE
City-St-Zip: ENGLEWOOD, FL 34224 US

Title: MGR (X) Delete
Name: GREY, SIMON
Address: 108 ST. GEORGE'S RD.
City-St-Zip: LONDON, ENGLAND, SE1 6EU

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ROBERT CATTERMOLE

MGR

10/31/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date