(Requestor's Name)				
(Address)				
(Address)				
(Cir	ty/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Do	cument Number)			
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Certified Copies	Certificates	of Status		
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Special Instructions to	Filing Officer:			

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NCR National Corporate Research (Hong Kong) Limited, a Hong Kong Limited Company

NCR National Corporate Research (UK) Limited, Registered in England and Wales, Registry # 8010712

Albany • Charlotte • Chicago • Dallas • Dover • Los Angeles • New York • Sacramento • Springfield • Tallahassee • Washington, D.C. • Hong Kong • London

Account#: 12000000088

Date: 01/18/2017					
Name: Marisa Kugelmann					
Reference #: M086311					
ENTITY NAME: BIOTRONIC SOUTHEAST, LLC					
Articles of Incorporation/Authorization to Transact Business					
Amendment					
Annual Report					
✓ Change of Agent					
Reinstatement					
Conversion					
Merger					
Dissolution/Withdrawal					
Fictitious Name					

#25.00 MKy



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8

	Account#: 12000000008
Date: 01/18/2017	
Name: Marisa Kugelmann	
Reference #: M086311	
ENTITY NAME: BIOTRONIC SOUTHEAST, LLC	
Articles of Incorporation/Authorization to Transact Business	
Amendment	
Annual Report	
✓ Change of Agent	
Reinstatement	
Conversion	
Merger	
Dissolution/Withdrawal	
Fictitious Name	
Other:	

COVER LETTER

Registration Section

TO:

	Division of Corporations			
SUBJE	CT. BIOT	RONIC	: sou	THEAST LLC
SODJE		of Lir	nited Li	ability Company
Dear Si	r or Madam:			
The end	closed Registered Agent/Registered Off	ice Char	nge and	fee(s) are submitted for filing.
Plcase 1	return all correspondence concerning th	is matte	r to the	following:
	Milde Cantains			
	Vikki Saeteurn			
	Name of Person			
	National Corporate Research	, Ltd.		
	Firm/Company			www.w*
	1325 J. Street, Suite 1550)		
	Address			<u> </u>
	Sacramento, CA 95814			
	City/State and Zip Code			
	tax@nuvasive.com			
E-	-mail address: (to be used for future ann	ual repo	rt notifi	ication)
For furt	ther information concerning this matter,	please (call:	
	Vikki Saeteurn	at (866	625-0837
	Name of Person			Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS:		M	AILING ADDRESS:
	Registration Section	Registration Section		
	Division of Corporations	Division of Corporations		
	Clifton Building	P.O. Box 6327		
	2661 Executive Center Circle	Tallahassee, Florida 32314		
	Tallahassee, Florida 32301			
	Enclosed is a check for the following	amoun	t:	
	☑ \$25 Filing Fee		□ \$5	55 Filing Fee & Certified Copy
INHS18	(2/14)			

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. Na	ame of the limited liability company:	BIOTRO	NIC SOUTHEAST, LLC
2. (a)	10420 Little Patuxent Parkway, #250	_ (b)	7475 Lusk Blvd.
` '	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Columbia, MD 21044		San Diego, CA 92121
	02/04/2005		L05000014383
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	C T CORPORATION SYSTEM		
(,	Registered Agent and Registered Office shown on the records of the	e Florida Dept.	of State:
	Registered Office Address (MUST BE FLORIDA STREET AD	DDRESS)	T JAN 18 AT CO
	1200 SOUTH PINE ISLAND ROA	,D	
	PLANTATION , FL_	33324	
(b)	National Corporate Research, Ltd., Ir	1 c .	
` .	Enter name of NEW Registered Agent and/or NEW Registered O	ffice address:	
	115 North Calhoun Street, Suite 4		
	NEW Registered Office Address:		
	Taliahassee , FL_	32301	
he chai gent w vas/we	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the rill be identical. Or, in the case of a Florida limited liability re authorized by an affirmative vote of the members of teles of organization or the operating agreement of the limited liability.	e registered ility compan the limited li mited liabilit	office and the business office of the registered by, it is hereby confirmed that the change(s) lability company or as otherwise provided in
Signate	ure of a member or authorized representative of a member	Section Contra	Printed or typed name of signee
rovisie he obli o mere	y accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pegations of my position as registered agent as provided for the reflect a change in the registered office address, I here in writing of this change.	erformance of or in Chapte reby confirm	of my duties, and I am familiar with and accept for 605, F.S. Or, if this document is being filed that the limited liability company has been
Sianatu-		rn, Assistant S	ecretary of National Corporate Research, Ltd.
rignatur	e of Registered Agent		