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DEC 16 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: NATERA LLC (Name of Limited Liability Company)				
Dear Sir or Madam: The enclosed Registered Agent/Registered Office Please return all correspondence concerning this	• • • • • • • • • • • • • • • • • • • •			
SCOTT MAYCH (Name of Person) NATEXA LLC (Firm/Company) 1157 COASTAL Cive (Address) OCOER, FL 3476 (City/State and Zip Code)	SECRETARY OF STATE ALLAHASSEE. FLORIDA	SERVICE OF THE PROPERTY OF THE		
For further information concerning this matter, p Scott March at (Name of Person)	please cail: (407) 654 - 2268 (Area Code & Daytime Telephone Number)			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check for the following as				
	☐ \$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 608.416 or 608.508, 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:	exa llc
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	y: 1157 COASTAL CITCLE OCORE, FL 34761
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
1/23/2006	10600037544
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	Corporation Services Company
Registered Office Address:	1201 HAYS STARTE E
	TALLAMASSER, FE 2501
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:
NEW Registered Agent:	Scott MARCHES -
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1157 COASTAL PENCE
	OCOBR ,FL 34761
If the limited liability company is not organized under the that after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the chereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles of limited liability company. (Signature of a member or authorized representative of a member)	laws of the State of Florida, it is hereby confirmed et address of the registered office and the business ase of a Florida limited liability company, it is by an affirmative vote of the members of the limited of organization or the operating agreement of the
Scott MArch	
(Printed or typed name of signee)	_
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pram familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified.	ngree to act in this capacity. I further agree to oper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, change in the registered office address, I hereby I in writing of this change.
(Signature of Registered Agent)	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00