2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000105272

Entity Name: BIOFORTUNE INVESTMENTS LLC

FILED Apr 20, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

VIA 3 SETTERNBRE 99 DOGANA VIA 3 SETTEMBRE 99, DOGANA SAN MARINO, 47891 SAN MARINO, IT 47891

Current Mailing Address: New Mailing Address:

VIA 3 SETTERNBRE 99 DOGANA VIA 3 SETTEMBRE 99, DOGANA SAN MARINO, 47891 SAN MARINO, IT 47891

FFI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

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: Name and Address of New Registered Agent:

AGENTS AND CORPORATIONS INC 300 FIFTH AVE SOUTH STE 101-330 NAPLES, FL 34102 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: CARRIEN

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

MGR () Delete CORNACCHIA, RICCARDO Name: VIA 3 SETTERNBRE 99 DOGANA Address:

City-St-Zip: SAN MARINO. 47891

Title: MGR () Delete Name: SANTAMARIA, CARLO

Address: VIA 3 SETTERNBRE 99 DOGANA City-St-Zip: SAN MARINO, 47891

Title: () Delete

Name: Address: City-St-Zip:

ADDITIONS/CHANGES:

Title: (X) Change () Addition CORNACCHIA, RICCARDO Name: Address: VIA 3 SETTEMBRE 99 DOGANA City-St-Zip: SAN MARINO, IT 47891 IT

Title: MGR (X) Change () Addition

Name: SANTAMARIA, CARLO Address: VIA 3 SETTEMBRE 99 DOGANA City-St-Zip: SAN MARINO, IT 47891 IT

Title: () Change (X) Addition CIACCHINI, ALESSANDRO Name: Address: VIA 3 SETTEMBRE 99 DOGANA City-St-Zip: SAN MARINO, IT 47891 IT

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: RICCARDO CORNACCHIA 04/20/2009