

L07000122477

**Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : HARVARD BUSINESS SERVICES, INC.
Account Number : I20080000045
Phone : (302) 645-7400
Fax Number : (302) 336-9724

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 08 AUG 19 AM 8:30

RECEIVED
 2008 AUG 19 AM 8:00
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE

MZ PHARMA LLC

Certificate of Status	0
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\$55.00

J. BRYAN

AUG 20 2008

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EXAMINER

H080001966563

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MZ Pharma 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:

Heather Briggs

(Name of Person)

Harvard Business Services, Inc.

(Firm/Company)

16192 Coastal Highway

(Address)

Lewes, DE 19958

(City/State and Zip Code)

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For further information concerning this matter, please call:

Heather Briggs

(Name of Person)

at (302) 645-7400 ext. 6124

(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 amount:

☐ \$25 Filing Fee

☒ \$55 Filing Fee & Certified Copy

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H08000196656 3

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: MZ Pharma LLC

2. (a) Principal office address of limited liability company: Brickell Bay Office Tower
 (Note: **MUST BE STREET ADDRESS**) 1001 Brickell Bay Drive, Suite 2310
Miami, Florida 33131, USA

(b) Mailing address of limited liability company: Brickell Bay Office Tower
 (Note: **MAY BE POST OFFICE BOX**) 1001 Brickell Bay Drive, Suite 2310
Miami, Florida 33131, USA

December 10, 2007
 3. Date of filing/registration in Florida

L07000122477
 4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: Transglobal Corporate Administration, LLC

Registered Office Address: 520 Brickell Key Drive, Suite O-305
Miami, Florida 33131

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent: NRAI Services, Inc.

NEW Registered Office Address: 2731 Executive Park Drive, Suite 4
 (Note: **MUST BE FLORIDA STREET ADDRESS**) Weston, FL 33331

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)

JOSÉ ANTONIO OLIVARET ALMARZA
 (Printed or typed name of signer)

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 608, 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)

Dani Keswani - Assistant Secretary - NRAI

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

INHS18 (05/08)

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