## LO8000031509

(Re	questor's Name)							
(110	questor s marrier							
(Address)								
(riddiess)								
(Address)								
(Cit	y/State/Zip/Phone	e #)						
PICK-UP	☐ WAIT	MAIL						
(Business Entity Name)								
(Document Number)								
Certified Copies Certificates of Status								
Special Instructions to Filing Officer:								
L								

Office Use Only



800275400228

08/18/15--01015--010 \*\*25.00

SECRETARY OF STATE

2015 AUG 18 P 12: 23

AUG 1 9 2015

8 MASON



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: August 14, 2015

Order#: 746332/046

Re: BIOMET MICROFIXATION, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX \_\_ Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Ami Casper

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

## 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	me of the limited liability company: BIOMET MICRO	FIXATIO	N, LLC				
2. (	(a)	1520 Tradeport Drive	(b) P.O. BOX 587					
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)					
			LEGAL DEPARTMENT			Τ		
		Jacksonville, FL 32218	WARSAW, IN 46581					
		02/28/2008		L08000021	1509			
3.		Date of filing/registration in Florida	4.	)	Document no	ımber		
5.	(a)	Corporate Creations Network, Inc.						
`	• ,	Registered Agent and Registered Office shown on the records of the	ne Florida l	Dept. of State:				
		11380 PROSPERITY FARMS ROAD #221E						
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)					
		Palm Beach Gardens , FL	33410					_
(	(b)	Corporation Service Company				17 F. C	2815	
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u>	Office add	ress:		AHA AHA	AUS	1: [ 
		1201 Hays Street				ARY O	<del></del>	
		NEW Registered Office Address:				OF S	ס	
						ORID	12: 2	
					,	Dm >	ü	
		Tallahassee , FL_	32301					
the age was the	cha nt v s/we arti	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liabre authorized by an affirmative vote of the members of cles of organization and the operating agreement of the law. Liwww.	the regist bility con the limi imited li UPath	ered office npany, it is ted liability ability company Kidw	and the busi hereby conf	ness of irmed to as other	fice of hat the erwise	the registered change(s) provided in
1 h	erei	by accept the appointment as registered agent and agre	e to act .	in this capa	city. I furth	er agre	e to coi	nply with the

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 605, 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 Corporation Service Company BY: Sylvia Queppet, Asst. Vice President