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B. BOSTICK
MAR 3 0 2012

EXAMINER



ION SERVICE COMPANY		
ACCOUNT NO.	: I2000000195	
REFERENCE		A
AUTHORIZATION	: Spellelena	~
COST LIMIT	: \$ 25.00	
ORDER DATE: March 28, 2012		
ORDER TIME : 11:08 AM		
ORDER NO. : 147759-010		
CUSTOMER NO: 7145A		
CHANGE OF AG	GENT	
NAME: BEEOLOGICS ADM	MIN, LLC	
	·	1 Si TAL
		2 HA
PLEASE RETURN THE FOLLOWING AS	PROOF OF FILING:	MAR 29
CERTIFIED COPY XX PLAIN STAMPED COPY		29 AM SSEE, F
MA PLANT STANFED COFT		AMIII: 41 Y OF STATE EE, FLORIDA
		A A
CONTACT PERSON: Becky Peirce -	- EXT# 2919	
	EXAMINER:	

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: Beeologics Ada	min, LLC		
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	: 800 N. Lindbergh Blvd. Mail Code E2NK		
1,1000	St. Louis, Missouri 63167		_
(b) Mailing address of limited liability company:	800 N. Lindbergh Blvd.		·······
(Note: MAY BE POST OFFICE BOX)	Mail Code E2NK		
	St. Louis, Missouri 63167		_
02/23/2009	L09000017796		
3. Date of filing/registration in Florida	. Document number		
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept.	of State:	.
Registered Agent:	CFRA, LLC	ALL SEU	
Registered Office Address:	100 S. Ashley Dr.	AH.	
Tagistita Citico fiamos.	Suite 400	SIN	J manus
	Tampa, FI. 33602		<u> </u>
		표 는 교	
(b) Enter name of NEW Registered Agent and/or NEV	V Registered Office address:	— പ്ര <u>−</u>	
NEW Registered Agent:	Corporation Service Company	ORI S	-
		- Ori -	
NEW Registered Office Address:	1201 Hays Street		_
(MUST BE FLORIDA STREET ADDRESS)	Tallahassee	FL 32301	
If the limited liability company is not organized under the lethat after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the ca hereby confirmed that the change(s) was/were authorized by liability company or as otherwise provided in the articles of limited liability company. (Signature of a member or authorized representative of a member)	address of the registered office se of a Florida limited liability y an affirmative vote of the men	e and the bus company, it nbers of the	iness is limited
Tom H. Adams, Director of Sole Member (Printed or typed name of signee)			
I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the proam familiar with and accept the obligations of my position if F.S. Or, if the document is being filed to merely reflect a confirm that the limited liability company has been notified	the state of the s	rther agree of my duties for in Chap adress, I hei	to s, and I ster 608, reby
(Signature of Registered Agent) Corporation Service Company	ky Peirce, Asst. Vice President		
Division of Corporations, P.O. Box	6327, Tallahassee, FL 32314		

FILING FEE: \$25.00

INHS18 (05/08)