

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000031534

Entity Name: BIOMETREX,LLC

**FILED**  
**Dec 20, 2013**  
**Secretary of State**

**Current Principal Place of Business:**

156 NW MAGNOLIA LAKES BLVD  
PORT ST. LUCIE, FL 34986

**New Principal Place of Business:**

**Current Mailing Address:**

156 NW MAGNOLIA LAKES BLVD  
PORT ST. LUCIE, FL 34986

**New Mailing Address:**

FEI Number: 27-2368302

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SANDERS, STEPHEN M JR.  
156 NW MAGNOLIA LAKES BLVD.  
PORT ST. LUCIE, FL 34986 US

**Name and Address of New Registered Agent:**

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: STEPHEN M. SANDERS JR.

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: CEO  
Name: SANDERS, STEPHEN M JR.  
Address: 156 NW MAGNOLIA LAKES BLVD.  
City-St-Zip: PORT ST. LUCIE, FL 34986

I hereby 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: STEPHEN M. SANDERS JR.

CEO

12/20/2013

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date