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COVER LETTER

Divi	sion of Corporations				
SUBJECT:	Cleanco Bioscience Group, LLC				
	Name of Limited Liability Company				
Dear Sir or M	Madam:				
The enclosed	l Registered Agent/Registered Offic	e Change and fe	e(s) are submitted for filing.		
Please return	all correspondence concerning this	matter to the fo	llowing:		
Richard Ly	rnch				
	Name of Person		•		
Lynch, Joh	inson & Long, LLC				
	Firm/Company	<u></u>	•		
603 N India	an River Drive Suite 300				
	Address	_			
Fort Pierce	, FL 34950				
	City/State and Zip Code	, .			
rick@ljlcpa					
E-mail a	address: (to be used for future annua	al report notifica	tion)		
For further in	formation concerning this matter, p	lease call:			
Richard Lyr	nch	772 at (466-1040)		
	Name of Person		Area Code & Daytime Telephone Number		
Regis Divis Clifto 2661	EET/COURIER ADDRESS: stration Section ion of Corporations on Building Executive Center Circle shassee, Florida 32301	Regis Divis P.O. I	LING ADDRESS: tration Section fon of Corporations Box 6327 nassee, Florida 32314		
Enclo	osed is a check for the following a	mount:			
☑ \$2:	5 Filing Fee	555 1	Filing Fee & Certified Copy		

INHS18 (2/14)

TO: Registration Section

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.

I. N	ame of the limited liability company: Cleanco B	ioscience	Group, LL	.C		
2. (a)	603 N Indian River Drive	(b	(b) 603 N Indian River Drive			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Suite 300	(0		Mailing address of limited lial (<u>Note: MAY BE POST OF</u> O		
	Fort Pierce, FL 34950			ce, FL 34950		
	09/02/2011		_1100010	1628		
3. 5. (a)	Date of filing/registration in Florida Mirkin, Mark H, Esq.	4.		Document number	- -	
(-)	Registered Agent and Registered Office shown on the records C/O Rimon, P.C.	of the Florida	Dept. of State.			
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)			ヹ	
	Jupiter	33458 FL_			: 1 <u>0</u> 2	
(b)	Richard L. Lynch				-7	
•	Enter name of NEW Registered Agent and/or NEW Register	ed Office addr	'ess:		<u> </u>	
	603 N Indian River Drive				FH 12:	
	NEW Registered Office Address:			H-	8	
	Suite 300					
	Fort Pierce , F	_L 34950				
agent w	mited liability company is not organized under the large or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited and authorized by an affirmative vote of the members eles of organization or the operating agreement of the	of the registe liability con of the limit	ered office a apany, it is l and liability	and the business office of hereby confirmed that the company or as otherwise	of the registered	
	Mark D. Krooner		D. Krosn			
	re of a member or authorized representative of a member	-		rinted or typed name of sign		
the obling to merel notified	y accept the appointment as registered agent and as of all statutes relative to the proper and complet gutions of my position as registered agent as provid y reflect a change in the registered office address, in whiting of this change.	gree to act in e performan led for in Ch I hereby con	this capac ce of my du apter 605, i firm that th	ity. I further agree to c tties, and I am familiar y F.S. Or, if this documer e limited liability compo	omply with the with and accept it is being filed my has been	
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