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COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJE	ECT: MEDIBIO USA, L	LC		
Name of Limited Liability Company				
Dear Si	ir or Madam:			
The en	closed Registered Agent/Registered Office Char	age and fee(s) are submitted for filing.		
Please	return all correspondence concerning this matter	to the following:		
	JATINKUMAR RAJANI			
	Name of Person			
M	EDIBIO USA, LLC			
	Firm/Company			
125	28 S. STONEBROOK CIRCLE	<u>-</u> -		
	Address			
7	DAVIE, FL 33330			
	City/State and Zip Code			
6	dehinoy @ medibiousa. co)M		
E	-mail address: (to be used for future annual repo	rt notification)		
For fur	ther information concerning this matter, please of	call:		
	DIPTI RAJANI at (_	310 7956225		
	Name of Person	Area Code & Daytime Telephone Number		
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
	Enclosed is a check for the following amoun	t :		
	☑ S25 Filing Fee	☐ \$55 Filing Fee & Certified Copy		
INHS18	3 (2/14)			

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. Name of the limited liability company: MEDIBIO USA	
2. (a) 12528 S. STONEBROOK CIRCLE (b) 1	12508 S. STONEBROOK CIRCLE
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
DAVIE	DAVIE
FL33330	FL 33330
9/05/2012	L12000114051
3. Date of filing/registration in Florida 4.	Document number
5. (a) SANJAY GUPTA & ASSOCIATES LL	C
Registered Agent and Registered Office shown on the records of the Florida Dept. o	of State:
SANJAY GUPTA 1776 W PINE ISLAN	DD RD
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
SUITE 309	
PLAN7ATION ,FL 33322	- -
(b) JATINKUMAR RAJANI	,
Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :	: : ;
12528 S. STONEBROOK CIRCLE	
NEW Registered Office Address:	
DAYIE	
	<u> </u>
If the limited liability company is not organized under the laws of the State of change or changes are made, the Florida street address of the registered office agent will be identical. Or, in the case of a Florida limited liability company was/were authorized by an affirmative vote of the members of the limited liability the articles of organization or the operating agreement of the limited liability. Signature of a member or authorized representative of a member. I hereby accept the appointment as registered agent and agree to act in this provisions of all statutes relative to the proper and complete performance of the obligations of my position as registered agent as provided for in Chapter to merely reflect a change in the registered office address, I hereby confirm to notified in writing of this change. Signature of Registered Agent	re and the business office of the registered v, it is hereby confirmed that the change(s) ability company or as otherwise provided in v company. TINKUMAR RATANI Printed or typed name of signee