

L13600044679

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TALLAHASSEE, FLORIDA

JUL 11 2014

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Molecule Sorting Services, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sean Barton

Name of Person

Molecule Sorting Services, LLC

Firm/Company

1313 N. Bronough St.

Address

Tallahassee, FL 32303

City/State and Zip Code

sb70@moleculesorting.com

E-mail address: (to be used for future annual report notification)

2014 JUL 11 PM 3:30
CLERK OF STATE
TALLAHASSEE, FL 32301

For further information concerning this matter, please call:

Sean Barton

Name of Person

850 570-0974

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$25.00 Filing Fee ☒ \$30.00 Filing Fee & Certificate of Status ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Molecule Sorting Services, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 2013-03-25 and assigned
Florida document number L13000044679.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

---name is unamended---

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1313 N. Bronough St.

Tallahassee, FL 32303

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1313 N. Bronough St.

Tallahassee, FL 32303

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Sean Barton

New Registered Office Address:

1313 N. Bronough St.

Enter Florida street address

Tallahassee

Florida 32303

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

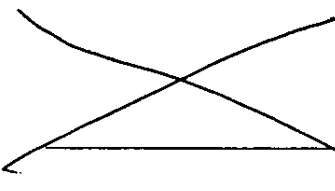
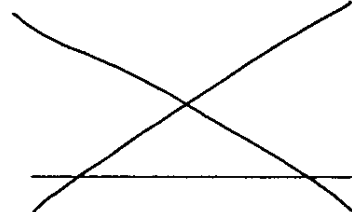
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided 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.

Sean Barton
If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGRM</u>	<u>Winton, Robin</u>	<u>1302 E. 6th Ave.</u>	<input type="checkbox"/> Add
		<u>Tallahassee, FL 32303</u>	<input checked="" type="checkbox"/> Remove
<u>MGRM</u>	<u>Barton, Sean</u>	<u>1302 E. 6th Ave.</u>	<input type="checkbox"/> Add
		<u>Tallahassee, FL 32303</u>	<input checked="" type="checkbox"/> Remove
<u>MGR</u>	<u>Barton, Sean</u>	<u>1313 N. Bronough St.</u>	<input checked="" type="checkbox"/> Add
		<u>Tallahassee, FL 32303</u>	<input type="checkbox"/> Remove
<u>MGR</u>	<u>Safron, Helena</u>	<u>1313 N. Bronough St.</u>	<input checked="" type="checkbox"/> Add
		<u>Tallahassee, FL 32303</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove



D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

---no other information amended---

E. Effective date, if other than the date of filing: --effective on date filed-- (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 2014-07-09



Signature of a member or authorized representative of a member

Sean Barton

Typed or printed name of signee

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FLORIDA

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Filing Fee: \$25.00