2455014

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(((H150000226523)))



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Division of Corporations Fax Number : (850)617-6383

From:

: LEGALROOM.COM INC.

Account Number : T20010000062 : (323)962-8600 Fax Number : (323) 962-3889

\*\*Enter the email address for this business entity to be used for future annual roport mailings. Enter only one email address please.\*\*

Email Address:

## LLC REGISTERED AGENT CHANGE CREATIVE BIOINFORMATICS CONSULTANTS, LLC

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Tố: Page 3 of 4

1/28/2015 12:28:06 PM PST

13239628300 From: Emma Richardson

## COVER LETTER

_	tion Section nof Corporations		
SUBJECT: C	REATIVE BIOINFORMATIC	S CONSULT	ANTS, LLC
	Name of	Limited Liab	ility Company
Dear Sir or Mac	iam:		
The enclosed R	egistered Agent/Registered (	Office Chang	e and fee(s) are submitted for filing.
Please roturn al	l correspondence concerning	g this matter t	o the following:
Cheyenne Mos	eley		
	Name of Person		<del></del>
Legalzoom.com	n, Inc.		
	Firm/Company		<del></del>
100 W. Broadw	ay Sulte 100		
	Address	<u> </u>	<del>_</del>
Giendale, CA 9	1210		
	City/State and Zip Code		_ <del></del>
mark@creative	bioinformatics.com		
E-mail addross	(to be used for fitture annual report	notification)	سنه جي
For further info	nnation concerning this mat	ter, please oal	l:
Imelda Vasque	z	323	962-8600 ext 7950
1	Name of Person	***\	Area Code & Daytime Telephone Number
Registrat Division Clifton I 2661 Exc	iveourier address: ion Section of Corporations suilding coutive Center Circle see, Florida 32301	Re D P.	AILING ADDRESS: egistration Section vision of Corporations O. Box 6327 Illahassoe, Florida 32314
Enclose	ed is a check for the following	ng amount:	
□ \$25 F	iling Fee	₽ 5	55 Filing Fee & Certified Copy

INHS18 (12/13)

2456014

1/28/2015 12:25:06 PM PST

13239628300 From: Emma Richardson

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114, 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.

l. Na	1. Narue of the limited liability company: CREATIVE BIOINFORMATICS CONSULTANTS, LLC				
2. (a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	10000 SW 52nd Ave., Q95 Gainesville, FL 32608			
(b)	Mailing address of limited liability company: (Nate: MAY BE POST OFFICE BOX)	10000 SW 52nd Ave., Q96 Gainesville, FL 32608			
02/10	/2014	L14000022602			
3. Dz	tc of filing/registration in Florida	4. Document number			
5. (a	) Registered Agent and Registered Office shown on t	he records of the Florida Dept. o	of State:		
	Registered Agent:	Mark N. Ziats			
	Registered Office Address:	10000 SW 52nd Ave., Q96 Gainesville, FL 32608			
(b)	Finter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	V Registered Office address:			
	NEW Registered Agent:	United States Corporation Agents	, Inc.		
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	13302 Winding Oak Court, Suite A			
	MODI DE LEGICIAI STRAIGE I MANAGES	Tampa ,	FL 33612		
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.  Signature of member or distinctived defresentative of a member					
	tor typed name of signee		when saves to		
i ner comp and I Chap addire	cby accept the appointment as registered agent and a ty with the provisions of all statutes relative to the production of an familiar with and accept the obligations of my poter 105, F.S. Or, if this document is being filled to me. See I hereby confirm that the limited liability company Cheyenne Moseley, Assistant Secretary on behalf of United Status Couporation Acades. Inc.	gree to act in this capacity. I ju- pper and complete performance slijon as registered agent us pro rely reflect a change in the regis has been notified in writing of	riner agree in of my duties, wided for in Mered office this change.		
Signat	ure of Redistered Agent		TAL		
	Division of Corporations, P.O. Box 63	27, Tailahassee, FL 32314			

FILING FEE: \$25.00

INH\$18 (12/13)