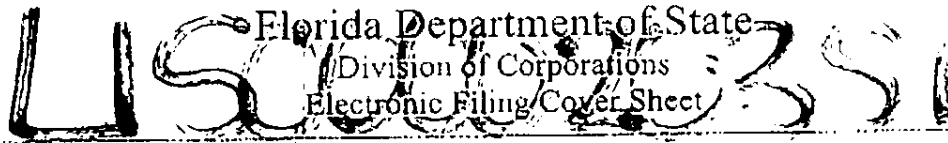


9/25/2017

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000251674 3)))



H170002516743ABCC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From: Account Name : TRIPP SCOTT, P.A.
Account Number : 075350000065
Phone : (954)525-7500
Fax Number : (954)761-8475

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

Email Address: _____

**LLC REGISTERED AGENT CHANGE
PROGEN HEREFORD GROUP, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

[Electronic Filing Menu](#)[Corporate Filing Menu](#)[Help](#)

D. SCOTT

SEP 26 2017

H17000251674

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: PROGEN HEREFORD GROUP, LLC

2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)

17701 Saxony Court

Boca Raton, FL 33498

02/11/2015

3. Date of filing/registration in Florida

(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)

PO Box 810126

Boca Raton, FL 33481-0126

L15000028351

4. Document number

5. (a) Sheri Schultz

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

100 S. Pine Island Road, Suite 440

Plantation, FL 33324

(b) Seth E. Ellis, Esq.

Enter name of NEW Registered Agent and/or NEW Registered Office address:

c/o Tripp Scott, P.A.

NEW Registered Office Address:

4755 Technology Way, Suite 205

Boca Raton, FL 33431

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.

Elizabeth Harris, Manager

Signature of member or authorized representative of a member

Printed or typed name of signer

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.

Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00

WHS18 (2/14)

H17000251674