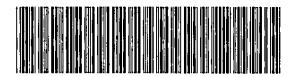
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2022 OCT 31 AM II: 55 SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations				
Mystique Genetics, LLC SUBJECT:				
	nited Liability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Chan	ge and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter	to the following:			
Rickey Spicer				
Name of Person				
Mystique Genetics, LLC				
Firm/Company				
1836 Radnor Drive				
Address				
Melbourne, Florida 32901-4225				
City/State and Zip Code				
R.Spicer@MystiqueGenetics.com				
E-mail address: (to be used for future annual report	rt notification)			
For further information concerning this matter, please co	all:			
Rickey Spicer 32	549-9553			
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 amount	:			
■ \$25 Filing Fee	☐ S55 Filing Fee & Certified Copy			

INHS18 (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. Na	ame of the limited liability company: Mystique Genetic	es, LLC					
2. (a)	1836 Radnor Dr. Melbourne Florida 32901-4225	(b) <u>1836</u> R	adnor Dr. Melbo	r. Melbourne Florida 32901-4225		
(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	 (Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
 3.	September 30, 2021 March 19, 1012 Date of filing/registration in Florida		L210004	30028 Document r	number		
(D)							
	Registered Agent and Registered Office shown on the records of	the Florid	a Dept. of S	State:			
	390 North Orange Ave.	400000	<u> </u>		<i>,</i>		
	Registered Office Address (MUST BE FLORIDA STREET STE. 2300-N	<u>AUUKES.</u>	<u>N</u>		022 OC FALL TALL	T	
	Orlando, FL	32801	801			j O Grano ⊣ Grano	
	Rickey Spicer				AM II: 55 Y OF STATE		
	Enter name of NEW Registered Agent and/or NEW Registered	i Office ac	ldress:	_	705 72> or	10,000 1	
	1836 Radnor Drive				ं हिं	1	
	NEW Registered Office Address:						
	Melbourne FI	32901-4	225	<u> </u>			
change igent v was⊬wi	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited licere authorized by an affirmative vote of the members of icles of organization of the operating agreement of the	register ability co of the lin limited	ed office impany, i nited liabi	and the busines t is hereby con- lity company o ompany.	ss office of the re firmed that the c	egistered hange(s)	
Signa	ture of a member of authorized representative of a member	-			ed name of signee	<u>-</u>	
I here provisi he obl	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide by reflect a change in the registered office address, I did writing of this change	perform	ance of m	ŵ duties, ånd L	am familiar with	and accen	
Silvatu	be of Registered Agent						

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