

L220000440000

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

(Document Number)

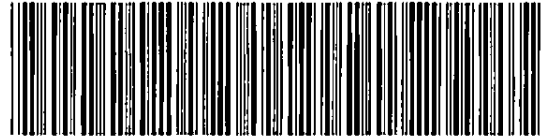
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

wrong forms

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Office Use Only



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2024 JUL 28 PM 5:13

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S. PRATHER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 16, 2024

BRICE BIOLABS LLC
1181 SAWGRASS CORPORATE PKWY
SUNRISE, FL 33323

SUBJECT: BRICE BIOLABS LLC
Ref. Number: L22000440000

We have received your document for BRICE BIOLABS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

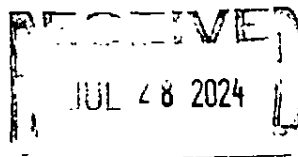
The form you submitted is for a FLORIDA PROFIT CORPORATION, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6939.

Stacy Prather
Regulatory Specialist III

Letter Number: 124A00015503



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BRICE Biolabs 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:

IRWIN E. KENDALL
Name of Person

BRICE Biolabs LLC
Firm/Company

1181 SAWGRASS CORPORATE PKWY
Address

SUNBUSH, FL 33323
City/State and Zip Code

BRICEBIO@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

IRWIN E. KENDALL at (954) 494 5032
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

Brico Biologics LLC

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

2024 JUL 28 11:51:13
CLERK OF COURT
CLERK OF COURT

The Articles of Organization for this Limited Liability Company were filed on 10-12-2022 and assigned Florida document number L-22000440000.

This amendment is submitted to amend the following:

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

Brico Biologics LLC

The new name must be distinguishable and contain 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) _____

Enter new mailing address, if applicable: _____

(Mailing address MAY BE A POST OFFICE BOX) _____

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: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____
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.

If Changing Registered Agent, Signature of New Registered Agent

[illegible]

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

This image shows a single page from a notebook or ledger. It features ten evenly spaced horizontal black lines across its entire width, providing a guide for writing. The background is plain white, and there are no other markings, text, or illustrations present.

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated July 23, 2024

J. J. Anderson
Signature of a member or authorized agent

Irwin E. Kendall

Typed or printed name of signee

2024 JUL 28 PM 5:13
JUL 28 2024

Filing Fee: \$25.00