## M020000 3495

(Req	uestor's Name)			
(Addı	ress)			
(Address)				
(City)	/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Soraya Sariaslani soraya.sariaslani@cscglobal.com

Date: January 15, 2019

Order#: 553018-046

Re: DCI BIOLOGICALS DUNEDIN, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX \_\_\_ Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Soraya Sariaslani

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

## 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: DCI BIOLOGICA	ALS DUN	EDIN, LLO	
2. (a)	17900 US19N	(b)	17900	US19N
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Clearwater, FL 33764	_	Clearwa	ter, FL 33764
	12/30/2002		M020000	03495
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	C T CORPORATION SYSTEM			
	Registered Agent and Registered Office shown on the records of the	he Florida I	Dept. of Stat	- e:
	1200 SOUTH PINE ISLAND ROAD			
	Registered Office Address (MUST BE FLORIDA STREET A	S 201		
				SECRITOR LANGE
	PLANTATION , FL_	33324		. 5 7
(b)	Corporation Service Company			
(0)	Enter name of NEW Registered Agent and/or NEW Registered C	Office addr	ess;	PH I2: 03
	<del></del>	_		03
	1201 Hays Street			
	<u>NEW</u> Registered Office Address:	· <del>-</del>		•
	Tallahanna			
	Tallahassee , FL_	32301		
ne cha agent w was/we	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the rill be identical. Or, in the case of a Florida limited liability and affirmative vote of the members of cles of ganization or the operating agreement of the li	he registe pility con the limit	ered office ipany, it is ed liability	and the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in
<u> </u>	Xee & Coni	Jill Cit	mi, Autho	rized Person
	ure of a member or authorized representative of a member			Printed or typed name of signee
provisio he obli o mere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I he is mitting of this change.	e to act in erforman for in Ch ereby con	n this cape ice of my a apter 605 firm that i	acity. I further agree to comply with the luties, and I am familiar with and accept, F.S. Or, if this document is being filed the limited liability company has been
Signatur	e of Registered Agent Corporation Service Company	BY: Gra	ce E. Kir	by, Asst. Vice President