

MD7000002653

Florida Department of State
Division of Corporations
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REGISTERED AGENT CHANGE

NAPCO LLC

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Help

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

Pursuant to the provisions of sections 608.416 or 608.508, 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: NAPCOLLC
2. (a) Principal office address of limited liability company: 333 Thornall Street
(Note: MUST BE STREET ADDRESS) Edison, NJ 08837

(b) Mailing address of limited liability company: 333 Thornall Street
(Note: MAY BE POST OFFICE BOX) Edison, NJ 08837

05/04/2007	MO700002653
3. Date of filing/registration in Florida	4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
- | | |
|----------------------------|---|
| Registered Agent: | <u>Quincy Atkins</u> |
| Registered Office Address: | <u>1200 North Federal Hwy., Ste. 200</u>
<u>Boca Raton, FL 33432</u> |

- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
- | | |
|---|------------------------------------|
| <u>NEW Registered Agent:</u> | <u>C.T. Corporation System</u> |
| <u>NEW Registered Office Address:</u> | <u>1200 South Pine Island Road</u> |
| <u>(MUST BE FLORIDA STREET ADDRESS)</u> | <u>Platation</u> <u>PL 38324</u> |

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 a member or authorized representative of a member)

DAVID PROCTOR

(Printed or typed name of Sitter)

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 008, 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.

By: Orino Institute ^{ET Corporation System}
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

Jane Zachritz FILING FEE: \$25.00

Assistant Secretary

INHS18 (05/08)

Figure 1. Study design. CT = control; E = exercise; T = treatment.

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