(Requestor's Name)	
(Address)	
(Address)	200292677602
(City/State/Zip/Phone #)	12/05/1601007016 **25.00
(Business Entity Name)	
(Document Number)	
tified Copies Certificates of Status	ALLANDER -
pecial Instructions to Filing Officer:	SEE FLORA

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D. SCOTT , DEC 6 2016

COVER LETTER

TO: Registration Section Division of Corporations

BETABIOTICA LLC

SUBJECT:

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DONNA BERTUCCI

Name of Person

CORPORATE DIRECT, INC.

Firm/Company

2248 MERIDIAN BLVD, STE H

Address

MINDEN, NV 89423

City/State and Zip Code

info@corporatedirect.com

E-mail address: (to be used for future annual report notification)

at

For further information concerning this matter, please call:

DONNA BERTUCCI

775 782-2201

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Enclosed is a check for the following amount:

2 \$25 Filing Fee

□ \$55 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.

Na	me of the limited liability company:		
(a)	REGISTERED AGENTS, INC.	(b) REGISTERED AGENTS, INC.	
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	3030 N. ROCKY POINT DR. STE 150A	3030 N. ROCKY POINT DR. STE 150A	
	TAMPA, FL 33607	TAMPA, FL 33607	
	07/14/2014	M14000004945	
	Date of filing/registration in Florida	4. Document number	
(a)	GERRI DETWEILER		
()	Registered Agent and Registered Office shown on the records of	f the Florida Dept. of State:	
	1037 GREYSTONE LANE		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	
	SARASOTA, FI	L ³⁴²³²	
(b)	REGISTERED AGENTS, INC.	TAL SEC	
,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office address:	
	3030 N. ROCKY POINT DR. STE 150A	SEL SE	
	NEW Registered Office Address:	HOG HO HOS HO	
	TAMPA , FI	_ <u>33607</u>	
cha	nge or changes are made, the Florida street address o vill be identical. Or, in the case of a Florida limited 1	ws of the State of Florida, it is hereby confirmed that after f the registered office and the business office of the registered iability company, it is hereby confirmed that the change(s) of the limited liability company or as otherwise provided in	
nt v /we	cles of organization or the operating agreement of the M	e limited liability company. DOUNA Bertucci	

provisions of all statistics 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.

_	Bel	λ	me.	Bill Havre

Signature of Registered Agent

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

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