

M 150000028 33

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

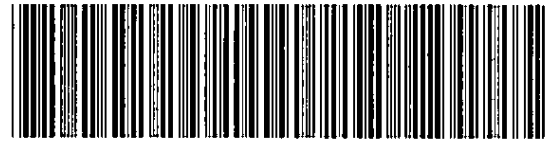
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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Y SULKER

AUG 19 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 26, 2019

ALGENOL BIOTECH LLC
16121 LEE RD SUITE 110
FORT MYERS, FL 33912

SUBJECT: ALGENOL BIOTECH LLC
Ref. Number: M15000002833

We have received your document for ALGENOL BIOTECH LLC and your check(s) totaling \$25.00. 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 LLC, but your entity is a FOREIGN LLC. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6050.

Yasemin Y Sulker
Regulatory Specialist III

Letter Number: 319A00015300

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: _____

Enter new principal office 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

2. The Florida document number of this limited liability company is: M15000002833

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 4/15/2015

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: Algenet Biotech, LLC
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer 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: James Pecenka

New Registered Office Address: 11121 Lee Road, Suite 110

Enter Florida Street Address

Fort Myers

City

Florida

FL

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.

Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:

Removing Edward & Quang and replacing w/ Ben, Bill,
Jim, and Alejandro
Title Capacity Name Address Type of Action

OWNER Alejandro Gonzalez Cimadevilla ☒ Add

☐ Remove

COO Ben Gardner 116121 Lee Road ☒ Add
Suite # 110
Fort Myers, FL 33912

☐ Remove

CRO William Porubsky 116121 Lee Road ☒ Add
Suite # 110

Fort Myers, FL 33912 ☐ Remove

☒ Add
Secretary James Pecenka

CEO Edward Legere ☐ Add

☒ Remove

GC & Quang Ha
interim
CFO

☐ Add

☒ Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the
aforementioned amendment(s), duly authenticated by the official having custody of records in the
jurisdiction under the law of which this entity is organized.

James Pecenka
Signature of the authorized representative

James Pecenka
Typed or printed name of signee

Filing Fee: \$25.00