

M 15000006443

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

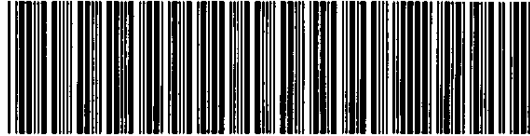
(Document Number)

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2016 SEP 15 P 12:12
CLERK OF STATE
TALLAHASSEE, FLORIDA

FILED

SEP 15 2016
J. BRUCE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 26, 2016

ELIZABETH ROBINSON
MCLANE MIDDLETON, PROFESSIONAL ASSOCIATI
300 TRADECENTER, SUITE 7000
WOBURN, MA 01801

SUBJECT: GRAVITY LABORATORIES, LLC
Ref. Number: M15000006443

2016 SEP 15 P 12:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

We have received your document for GRAVITY LABORATORIES, LLC and your check(s) totaling \$25.00. However, the document has not been filed and is being retained in this office for the following:

A foreign limited liability company which needs to correct any false statement or has changed its name, duration, or jurisdiction should file an amended application in this office within 30 days after the occurrence of any such change. The form should be accompanied by a filing fee of \$25, an additional \$30 for each certified copy (optional) requested, and an original certificate from the domicile state when amending the name, duration, or jurisdiction. Said certificate must evidence the amendment and be issued within the last 90 days.

If the amendment is merely to correct a false statement listed on a document previously filed with the Florida Department of State or does not require an amendment to be filed in its domicile state or country, a certificate is not necessary.

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) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 916A00018236

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Gravity Laboratories, LLC

Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Elizabeth Robinson

Name of Person

McLane Middleton, Professional Association

Firm/Company

300 TradeCenter, Suite 7000

Address

Woburn, MA 01801

City/State and Zip Code

darrynd@momentum-medical.com

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

For further information concerning this matter, please call:

Elizabeth Robinson

Name of Person

at (781) 904-2703

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:

☐ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

FILED
2016 SEP 15 P 12:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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: Gravity Laboratories, LLC

Enter new principal office address, if applicable:

2013 Live Oak Blvd

(Principal office address

Suite C

MUST BE A STREET ADDRESS)

Saint Cloud, FL 34771

Enter new mailing address, if applicable:

2013 Live Oak Blvd

(Mailing address

Suite C

MAY BE A POST OFFICE BOX)

Saint Cloud, FL 34771

2. The Florida document number of this limited liability company is: M15000006443

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 8/14/2015

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

5. New name of the limited liability company: Momentum Laboratories, LLC

(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

---Alternate Name - Momentum Molecular, 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: Darryn T. Dierickx

New Registered Office Address: 2013 Live Oak Blvd, Suite C

Enter Florida Street Address

Saint Cloud

Florida 34771

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.

Darryn T. Dierickx
If Changing Registered Agent, 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)(e), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Anthony Remington	204 37th Ave North # 333, St Petersburg, FL 33704	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> 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.

[Signature]
Signature of the authorized representative

DARRYN DIERICKX
Typed or printed name of signee

Filing Fee: \$25.00

2016 SEP 15 P 12:12
FILED
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT
COPY OF THE CERTIFICATE OF AMENDMENT OF "GRAVITY LABORATORIES,
LLC", CHANGING ITS NAME FROM "GRAVITY LABORATORIES, LLC" TO
"MOMENTUM LABORATORIES, LLC", FILED IN THIS OFFICE ON THE
TWENTY-FIRST DAY OF APRIL, A.D. 2016, AT 3:34 O'CLOCK P.M.



5789901 8100
SR# 20162469656

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 202194424
Date: 04-22-16

State of Delaware
Secretary of State
Division of Corporations
Dated: 03:34 PM 04/21/2016
FILED 03:34 PM 04/21/2016
SR 20161407655 - File Number 5789901

**STATE OF DELAWARE
CERTIFICATE OF AMENDMENT
OF
GRAVITY LABORATORIES, LLC**

**PURSUANT TO THE DELAWARE LIMITED LIABILITY COMPANY ACT
18 Delaware Code Sections 101 et seq.**

**THE UNDERSIGNED, UNDER THE DELAWARE LIMITED LIABILITY
COMPANY ACT, SUBMITS THE FOLLOWING CERTIFICATE OF AMENDMENT:**

FIRST: The name of the limited liability company is:

Gravity Laboratories, LLC

SECOND: The Certificate of Formation of the limited liability company is hereby
amended as follows:

Article FIRST of the Certificate of Formation of the Limited Liability
Company shall be deleted in its entirety and replaced with the
following:

FIRST: The name of the limited liability company is:

Momentum Laboratories, LLC

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Amendment
on this 21 day of April, 2016.

Gravity Laboratories, LLC

By: Anthony Remington
Anthony Remington, Authorized Person