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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	me of the limited liability company: NANTOMIC	S, LLC	· · · · · · · · · · · · · · · · · · ·	
	(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	····· \	. 47	Mailing address of limited liability company; (Note: MAY RE POST OFFICE BOX)
		9920 JEFFERSON BLVD		9920 JE	FFERSON BLVD
		CULVER CITY, CA 90232		CULVE	R CITY, CA 90232
			×11.	11 5 1 22	
		5/27/2016		M160000	04337
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	Registered Agent and Registered Office shown on the records of			_
		Registered Agent and Registered Office shown on the records of GREER JATTAN	the Florid	in Dept. of State	e:
		Registered Office Address (MUST BE FLORIDA STREET	ADDRES	Z :	-
		11950 ROYCE WATERFORD CIRCLE	10.1	1000 PM	
		TAMPA , FL	33626	3	
					TH 25
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:					
		Enter thank of the W Resident Agent allow the W Resident	OM FE	AALES-	D D
		NRAI SERVICES, INC.			
		NEW Registered Office Address:			
		1200 SOUTH PINE ISLAND ROAD	-		
		PI ANTATION		22224	
		PLANTATION , FL	٠	22224	-
the age wa	cha ent w s/we	mited liability company is not organized under the large or changes are made, the Florida street address of all be identical. Or, in the case of a Florida limited live authorized by an affirmative vote of the members of the organization or the operating agreement of the	the reg ability of if the lii	istered office company, it is nited liability	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
		110			Shahrooz Rabizadeh
		ure of a member or authorized representative of a member		••	Printed or typed name of signee
J h pro the to t not	<i>yyea</i>	ly accept the appointment as registered agent and age ons of all statutes relative to the proper and complete gations of my position as registered agent as provide by reflect a change in the registered office address, I In writing of this change.	ree to ac perform d for in hereby c	citin this cape natice of my Unapter 605 confirm that	acity. I further agree to comply with the duties, and I am familiar with and accept i, F.S. Or, if this document is heing filed the limited liability company has been
Sig	ρα Continu	dur Arabas Candice Pignataro, Asster of Registered Agent	. Secr	etary, NR	AI Services, Inc.