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NCR National Corporate Research (Hong Kong) Limited, a Hong Kong Limited Company

NCR National Corporate Research (UK) Limited, Registered in England and Wales, Registry # 8010712

Albany • Charlotte • Chicago • Dallas • Dover • Los Angeles • New York • Sacramento • Springfield • Tallahassee • Washington, D.C. • Hong Kong • London

Account#: I2000000088

Date: 01/18/2017	
Name: Marisa Kugelmann	
Reference #: M086311	
ENTITY NAME: BIOTRONIC NATIONAL LLC	
Articles of Incorporation/Authorization to Transact Business	
Amendment	
Annual Report	
✓ Change of Agent	
Reinstatement	ದೆಯ ತ
Conversion	ECRES E
Merger	₩ 5 F
Dissolution/Withdrawal	四
Fictitious Name	9 28
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115 North Calhoun Street, Suite #4, Tallahassee, FL 32301
Telephone: (866) 625-0838 Fax: (866) 625-0839 International +1 (212) 947-7200
Website: www.nationalcorp.com



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Dissolution/Withdrawal	SECO TALL
Fictitious Name	MIN TO THE PILE
Other:	
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## COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJ	ECT: Bio	OTRONI	C NAT	IONAL	., LLC	
	Ne	me of Li	nited Li	ability (	Company	
Dear !	Sir or Madam:					
The c	nclosed Registered Agent/Registered O	ffice Cha	nge and	fee(s) a	are submitted for filing.	
Plcase	e return all correspondence concerning	his matte	r to the	followi	ng:	
	Vikki Saeteurn					
	Name of Person			_		
	National Corporate Research	h, Ltd.				
	Firm/Company					
***********	1325 J. Street, Suite 15	50				
	Address					
	Sacramento, CA 9581	4		_		
	City/State and Zip Code					1. SEG
	vsaeteurn@nationalcorp.	com				三字 宝一
	E-mail address: (to be used for future an	ınual repo	ort notifi	cation)		1035 2
For fu	rther information concerning this matte	r, please	call:			新写 <b>宝</b>
	Vikki Saeteurn	at (	866	)	625-0837	9 28
	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	ıg amoun	ıt:			
	□ \$25 Filing Fee		□.\$5	5 Filing	g Fee & Certified Copy	
INHS1	8 (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.

I. Name of the limited liability company: BIOTI			TRONIC NATIONAL, LLC		
2. (a)	10420 Little Patuxent Parkway, #250	(b)		7475 Lusk Blvd.	
<b>2</b> . (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(~).	Ma	niling address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Columbia, MD 21044	igge. tun		San Diego, CA 92121	
	06/22/2016	-		M16000005033	
3.	Date of filing/registration in Florida	4.		ocument number	
5. (a)	C T CORPORATION SYSTEM			·	
J. (a)	Registered Agent and Registered Office shown on the records of the	e Florida D	ept. of State:		
	Registered Office Address (MUST BE FLORIDA STREET AL	DDRESS)			
	1200 SOUTH PINE ISLAND ROA	D			
	PLANTATION, FL_	333	24		
	National Cornerate Passarch   trl.	no			
(b)	National Corporate Research, Ltd., Inc.  Enter name of NEW Registered Agent and/or NEW Registered Office address:			<u> </u>	
				三年 五	
	115 North Calhoun Street, Suite 4	<u> </u>		IN 18	
	NEW Registered Office Address:				
				- Eg <b>.</b>	
	, FL, FL,	323	01	28 W.	
the cha agent v was/we the arti	imited liability company is not organized under the laws ange or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liabilities authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liabilities of a member of authorized tepresentative of a member of the liability accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete prigations of my position as registered agent as provided by reflect a change in the registered office address, I held in writing of this change.	ne registerility com the limited mited lia Assistant S	red office a pany, it is led liability bility comp ecretary of Nu	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in any.  Nathaniel Sisitsky Vasive Clinical Services Monitoring, Inc., its member Printed or typed name of signee	
	Gli Jan Vikki Saete	eum, Assis	tant Secretary	of National Corporate Research, Ltd.	
Signatu	re of Registered Agent				