P04000095072

(F	Requestor's Name)					
(Address)						
(A	address)					
(0	City/State/Zip/Phone #)					
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SECRETARY OF STATE
TALLAHAS SEE FLORIDA

Policios

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Palmetto Fertility Laboratory, Inc.							
(Name of Corporation)							
DOCUMENT NUMBER: P04000095072	2						
The enclosed Statement of Change of Registere	ed Office/Agent and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:							
•							
William J. Spratt, Jr.							
(Name of Contact Person)							
	,						
K&L Gates							
.—	Firm/Company)						
	ning 20th Floor						
200 South Biscayne Blvd., 20th Floor							
(Address)							
Miami, Florida 33131-2399							
(City/State and Zip Code)							
For further information concerning this matter,	please call:						
William J. Spratt, Jr.	at (305) 539-3300						
(Name of Contact Person)	at (305) 539-3300 (Area Code & Daytime Telephone Number)						
Enclosed is a \$35.00 check made payable to the	e Department of State.						
Mailing Address:	Street Address:						
Amendment Section	Amendment Section						
Division of Corporat P.O. Box 6327	ions Division of Corporations Clifton Building						
Tallahassee, FL 323							

Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of char	nge is submitted	tions 607.0502, 6. for a corporation egistered office or	organized unde	r the laws of the	State of_	Florida
1. The name of the	he corporation:_	Palmetto Fert	ility Laborato	ry, Inc.		
2. The principal	office address:	7100 West 20) th Avenue, Su	iite 205, Hiale	ah, Flor	ida 33016
3. The mailing ac	ddress (if differe	nt): 200 Sou	th Biscay	ne Blvd.,	20th	Floor
		Miami,	Florida	33131-239		
4. Date of incorp	oration/qualifica	tion: 06/17/20	004 Doo	cument number:	P0400	00095072
5. The name and Florida Depart		f the current regist	tered agent and r	registered office	on file wi	ith the
	Willia	m J. Sprat	t, Jr.			
•	201 S.	Biscayne :	Blvd., Su	ite 2000		_
	Miami,	Florida	33131-239	9	Ţ	
6. The name and (if changed):		f the new registere	-	ged) and /or reg	istered off	FILE 07 OCT 16 SECRETARYS
	200 Soi	uth Biscayı	ne Blvd.,	20th Floo	or	
	· · · · · · · · · · · · · · · · · · ·	(P.O Box NOT ac	<u> </u>			- CORA
	Miami,	Florida :	33131 <u>-239</u> 9	9	···	DEF 3
The street address changed will	ss of its register be identical.	ed office and the	street address o	of the business o	office of it	ts registered agent,
Such change was authorized by the	s authorized by e board, or the	resolution duly a	dopted by its be een notified in v	oard of directors writing of the cl	s or by an nange.	officer so
	e of an Jinger of dire	ctorl	M	ichael Graube		<u></u>
I hereby accept	the appointment	os registered on	ent and agree to all statutes relat he obligation of e in the register hange	o act in this car	acitu.	mplete performance ed agent. Or, if this by confirm that the
_ UN	mm			10/15	1.7	
If signing on ber	nature of Registered A	,		i (D#	ue)	
-	•	•				
(T ₃	yped or Printed Name)				

* * * FILING FEE: \$35.00 * * *