P070005223

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	<u></u>
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of State	tus
Special Instructions to Filing Officer:	
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COVER LETTER

SUBJECT: Bio-Brain, Inc.
Name of Corporation
DOCUMENT NUMBER: P07000052223
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Barbara Goldman Name of Contact Person
Bio-Brain, Inc.
Firm/Company
127 River Enclave Ct
Address
Bradenton, Fl 34212
City/State and Zip Code
barbara.goldman@bio-brain.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amendment Section Division of Corporations

TO:

Barbara Goldman Name of Contact Person

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Bio-Brain, Inc.
2. The principal office address: 127 River Enclave Ct Bradenton, FI 34212
3. The mailing address (if different):
4. Date of incorporation/qualification: 4/30/2007 Document number: P07000052223
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Bio-Brain, Inc. 록摄 ಈ
Bio-Brain, Inc. 325 Interstate Blvd Sarasota, Fl 34240
Sarasota, Fl 34240
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
127 River Enclave Ct
P.O. Box NOT acceptable Bradenton, FI 34212
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board or the corporation has been notified in writing of the change.
Signature of an officer or director Barbara Goldman, President Printed or typed name and title
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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Ja. har Geloh 1/02/2018
Signature of Registered Agent Date
If signing on behalf of an entity:
Typed or Printed Name * * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)