

Florida Department of State
Division of Corporations
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TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE

BRAIN PHARMA, INC.

Certificate of Status	0
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Corporate Filing Menu

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Brain Pharma, Inc.
(Name of corporation)

DOCUMENT NUMBER: P08000056881

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:

Brittani Phelps
(Name of contact person)

Business Filings Incorporated
(Firm/Company)

3812 North 29th Avenue,
(Address)

Hollywood, Florida, 33020
(City/state and zip code)

For further information concerning this matter, please call:

Business Filings Incorporated, Attn: Brittani Phelps ext 269 at (608) 827-5300
(Name of contact person) (Area code & daytime telephone number)

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
409 E. Gaines Street
Tallahassee, FL 32399

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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: Brain Pharma, Inc.
2. The principal office address: 3000 Island Blvd., Apt. 1601, Aventura, Florida 33160
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 6/10/2008 Document number: P08000056881
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

DARLENE KING3810 NORTH 29TH AVEHOLLYWOOD FL 33020

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

DEREK ETTINGER3812 North 29th Avenue(P.O. Box NOT acceptable)Hollywood, FL 33020

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]
(Signature of an officer or director)

Derek Ettinger, 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.

[Signature]
(Signature of Registered Agent)

11/25/08
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE

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