P10000103075

(Re	equestor's Name)	
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COVER LETTER

Name D	a an action Table design to		
SUBJECT: NOVEL BI	Pl Bio-spectrum Technologies, Inc. Name of Corporation		
	Name of Corporation		
OOCUMENT NUMBER:	P10000103075		
he enclosed Statement of Change o	f Registered Office/Agent and fee are submitted for filing.		
Please return all correspondence con	cerning this matter to the following:		
	Hercules S. Apostolatos		
	Name of Contact Person		
Nove	el Bio-spectrum Technologies, Inc.		
	Firm/Company		
3	3802 Spectrum Blvd., Suite 127		
	Address		
	Tampa, Florida 33612 US City/State and Zip Code		
	City/State and Zip Code		
	iraklis99@aol.com		
E-mail address:	(to be used for future annual report notification)		
For further information concerning th	nis matter, please call:		
Hercules S. Aposto	platos at (813) 667-8324 Son Area Code & Daytime Telephone N		
Name of Contact Pers	at (

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

statement of cha	provisions of sections 607.0502, 617 inge is submitted for a corporation of ir to change its registered office or re	rganized under the laws of	f the State o	f Florida	
	the corporation: Novel Bio-spe	0		j rioriaa.	
2. The principal	office address: 3802 Spectrum E	Blvd., Suite 127			
Tampa, Fl	orida 33612 US				
3. The mailing a	ddress (if different):				
4. Date of incorp	poration/qualification: 01/03/20	011 Document num	ber:	P10000103075	_
	street address of the current register tment of State: (If resigned, enter res		fice on file	with the	
	CORPORATION SERVICE	COMPANY			
	1201 HAYS ST.			TALL SECTION	p#
	TALLAHASSEE FL 32301 U	S		200	in a
6. The name and (if changed):	street address of the new registered	agent (if changed) and /or	registered o	office Service 12	
	Hercules S. Apostolatos				
	3802 Spectrum Blvd., Suite	127			
		NOT acceptable	····		
	Tampa, Florida 33612 US			<u> </u>	
The street address changed will	ess of its registered office and the str be identical.	reet address of the busine	ss office of	fits registered agent,	
	as authorized by resolution duly ado be board, or the corporation has been	pted by its board of direct in notified in writing of th	ctors or by a e change.	an officer so	
Signatur	e of an officer of director	Hercules A	postolato typed name and	s, President	
I hereby accept I further agree to of my duties, an document is beil corporation has	the appointment as registered agen o comply with the provisions of all all am familiar with and accept the ng filed merely to reflect a change i been notified in writing of this cha		• •		
Hund	agential Agent	Nov	<i>2</i>	2011	
Sign	nature of Registered Agent		Date		
If signing on be	half of an entity:				
ту	ped 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