

P140000 33310

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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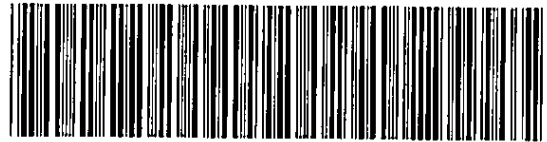
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLERNT

2019 AUG 12 PM 5:00

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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: STEMTECH HEALTHSCIENCES CORP  
Name of Corporation

DOCUMENT NUMBER: P14000033310

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:

JOHN W. MEYER  
Name of Contact Person

STEMTECH HEALTHSCIENCES CORP  
Firm/Company

10370 USA TODAY WAY  
Address

MIRAMAR, FL 33025  
City/State and Zip Code

JMEYER@STEMTECH.COM ✓  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOHN W. MEYER at ( 954 ) 715-6000 x1002  
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  
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: STEMTECH HEALTHSCIENCES CORP
2. The principal office address: 10370 USA TODAY WAY  
MIRAMAR, FL 33025
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: APRIL 14, 2014 Document number: P14000033310

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)

GREENSPOON MAROER LLP  
200 EAST BROWARD BLVD, SUITE 1800  
FORT LAUDERDALE, FL 33301

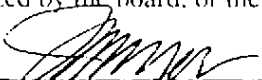
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

JOHN W. MEYER  
10370 USA TODAY WAY  
P.O. Box NOT acceptable  
MIRAMAR, FL 33025

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TALLAHASSEE, FL

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

JOHN W. MEYER, COO  
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 of Registered Agent

AUGUST 7, 2019  
Date

If signing on behalf of an entity:

JOHN W. MEYER  
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE