

P15000008229

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

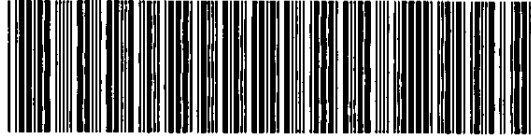
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

FILED

DEC 23 2014
C. CARROTHERS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 9, 2015

PIT LING YAY
BERKELEY SCIENTIFIC INC
4009N HIMES AVE
TAMPA, FL 33607

SUBJECT: BERKELEY SCIENTIFIC, INC.
Ref. Number: P15000008629

We have received your document for BERKELEY SCIENTIFIC, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Cathy A Carrothers
Regulatory Specialist

Letter Number: 315A00023692

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BERKELEY SCIENTIFIC INC
Name of Corporation

DOCUMENT NUMBER: P 1500000 8629

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:

Pit Ling TJAY
Name of Contact Person

BERKELEY SCIENTIFIC INC
Firm/Company

4009 N HIMES AVENUE
Address

TAMPA, FL 33607
City/State and Zip Code

PLTJAY e YAHOO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Pit Ling TJAY at (813) 453-2253
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: BERKELEY SCIENTIFIC INC
2. The principal office address: 4009 N HIMES AVENUE
TAMPA, FL 33607
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 01/27/15 Document number: P15000008629
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)

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

RESIGNED

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

SUKUMANT JAYAWARDANA JR
4009 N HIMES AVE. TAMPA, FL 33607

P.O. Box NOT acceptable

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

Pit Ling Jayawardana
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, hereby confirm that the corporation has been notified in writing of this change.

[Signature]
Signature of Registered Agent

12/14/15
Date

If signing on behalf of an entity:

S
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

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