

P1500068474

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

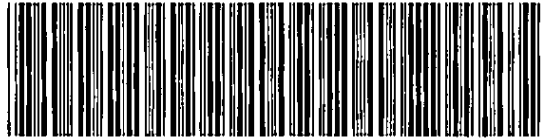
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600351162136

09/03/20--01023--021 \*\*35.00

FILED  
2020 SEP -3 PM 1:43  
SECRETARY OF STATE  
TALLAHASSEE, FL

JA 10/14/20

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Peptide BioSciences, Inc.  
\_\_\_\_\_  
(Name of Alien Business Organization)

Dear Sir or Madam:

The enclosed Statement of Change of Registered Agent/Registered Office for Alien Business Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jack Duboise  
\_\_\_\_\_  
(Name of Person)

Peptide BioSciences, Inc.  
\_\_\_\_\_  
(Firm/Company)

14936 Magnolia Boulevard #3  
\_\_\_\_\_  
(Address)

Sherman Oaks, CA 91403  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Jack Duboise at (310) 990-3632  
\_\_\_\_\_  
(Name of Person) (Area Code & Daytime Telephone Number)

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

**Street Address:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☒ \$35.00 Filing Fee

☐ \$43.75 Filing Fee & Certified Copy

**STATEMENT OF CHANGE OF REGISTERED AGENT AND/OR  
REGISTERED OFFICE FOR ALIEN BUSINESS ORGANIZATION**

PURSUANT TO SECTION 607.0505, FLORIDA STATUTES, THE UNDERSIGNED ALIEN BUSINESS ORGANIZATION SUBMITS THE FOLLOWING STATEMENT IN ORDER TO CHANGE ITS REGISTERED OFFICE AND/OR REGISTERED AGENT:

1. Peptide BioSciences, Inc.  
(Name of alien business organization)

2. 8-10-2015 3. P15000068474 4. 47-4810571  
(Florida registration date) (Florida document number) (FEI Number, if applicable)

5. 7901 4th Street N., Suite 300, St. Petersburg, FLA 33702  
(Principal office address)

6. Name and address of registered agent and office currently on record with this office:

Edgar Veytia  
5115 22nd Street N.  
St. Petersburg, FLA 33714

7. New registered agent and/or office address:

Registered Agents, Inc., Attention Bill Havre  
7901 4th Street N., Suite 300  
St. Petersburg, FLA 33702

(Note: Registered office must be a Florida street address)

8. The street address of the registered office and the street address of the business office of the registered agent are identical.
9. Such change was authorized by the board of directors or an officer of the corporation so authorized by the board of directors.

10. Jack DuBoise  
(Signature of chairman, vice chairman, or officer)

11. Jack DuBoise, Chief Operating Officer  
(Name and capacity of person signing in number 10 above)

12. Signature of new registered agent, if applicable:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of section 607.0505, Florida Statutes.

Bill Havre by Jack DuBoise  
(Registered agent accepting appointment)

August 11, 2020  
(Date)

**FILING FEE: \$35.00**

**Make checks payable to Florida Department of State and mail to:  
Division of Corporations P. O. Box 6327 - Tallahassee, FL 32314**

SECRETARY OF STATE  
TALLAHASSEE, FL

2020 SEP -3 PM 1:43

FILED