

P160000016144

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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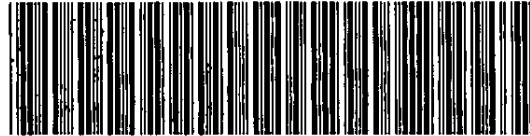
(Business Entity Name)

(Document Number)

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TO: Amendment Section
Division of Corporations

SUBJECT: Biokinetic Labs, Inc.
Name of Corporation

DOCUMENT NUMBER: P160000 16144

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:

David Zeuner
Name of Contact Person

Biokinetic Labs, Inc
Firm/Company

7064 Sampey Rd Unit 5
Address

Groveland FL 34736
City/State and Zip Code

davidz116@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Zeuner at (305) 987-5051
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: Biokinetic Labs, Inc.
2. The principal office address: 7064 Sampey Rd Unit 5
Groveland FL 34736
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 2/18/2016 Document number: P16000016144

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)

Resigned
Angela R Butler
2835 Lake Michaela Blvd Valrico FL 33596

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

David Zeuner
7064 Sampey Rd Unit 5
P.O. Box NOT acceptable
Groveland FL 34736

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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.

DLZ
Signature of an officer or director

David Zeuner CEO
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.

DLZ
Signature of Registered Agent

5/24/16
Date

If signing on behalf of an entity:

Typed or Printed Name

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