	,			
FEI Number: 26-0875196			Certificate of Status Desired: Yes	
Name and A	ddress of Current Registered Agent:			
EDWARDS, RO 3842 NW 126TH CORAL SPRING				
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.				
SIGNATURE	: ROBERT J EDWARDS JR			01/30/2014
SIGNATURE	Electronic Signature of Registered Agent			01/30/2014 Date
	Electronic Signature of Registered Agent	Title	AUTHORIZED MEMBER	
Authorized	Electronic Signature of Registered Agent Person(s) Detail :	Title Name	AUTHORIZED MEMBER ANZALONE, JOSEPH	
Authorized	Electronic Signature of Registered Agent Person(s) Detail : D			

DOCUMENT# L07000082221

Entity Name: E5 PHARMA, LLC

Current Principal Place of Business:

3842 NW 126TH AVE CORAL SPRINGS, FL 33065

Current Mailing Address:

P O BOX 273289 BOCA RATON, FL 33427 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROBERT J EDWARDS JR

D

01/30/2014

Electronic Signature of Signing Authorized Person(s) Detail

FILED Jan 30, 2014 **Secretary of State** CC8685561417

Date