# F14000004879

| (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: |  |  |  |
|   |  |  |  |
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Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 560985 7981390

AUTHORIZATION :

COST LIMIT : \$\sqrt{5}2.50

ORDER DATE: March 24, 2015

ORDER TIME : 11:38 AM

ORDER NO. : 560985-005

CUSTOMER NO: 7981390

#### FOREIGN FILINGS

NAME: UMTB ACQUISITION CO., INC.

XX CORPORATE

\_\_\_ LIMITED PARTNERSHIP

\_\_\_\_\_ LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

PLAIN STAMPED COPY

XX \_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

### **COVER LETTER**

| TO: Amendment Section Division of Corporations  |
|---|
| UMTB ACQUISITION CO., INC.  |
| Name of Corporation   |
| DOCUMENT NUMBER: F14000004879   |
| The enclosed Amendment and fee are submitted for filing.  |
| Please return all correspondence concerning this matter to the following:   |
| ESTHER DREW   |
| Name of Contact Person  |
| VIVEX BIOMEDICAL, INC,  |
| Firm/Company  |
| 1755 W. OAK PKWY - STE 200  |
| Address   |
| MARIETTA, GA 30062  |
| City/State and Zip Code   |
| esther@vivex.com  |
| E-mail address: (to be used for future annual report notification)  |
| For further information concerning this matter, please call:  |
| ESTHER DREW 770 575-5185 at ( )   |
| Name of Contact Person Area Code & Daytime Telephone Number   |
| Enclosed is a check for the following amount:   |
| \$35.00 Filing Fee Certificate of Status  \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)  \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) |
|   |

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

# PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

|   |  | <b>™</b>  |
|---|--|---|
|   | SECTION I<br>(1-3 must be completed)   | A SECOND  |
|   | F140000048789  | <b>三</b>  |
|   | (Document number of corporation (if known)   | 25<br>28  |
| UMTB ACQUISITION CO., INC                                   |  | P. F. F. S  |
| (Name   | of corporation as it appears on the records of the Departmen   | t of State) SREET 3   |
| GEORGIA   | 3 NOVEMBER 19, 2   | 2014 d to do business in Florida)   |
| (Incorporated   | under laws of) (Date authorized  | d to do business in Florida)  |
|   | SECTION II (4-7 COMPLETE ONLY THE APPLICABLE CHANGES   |   |
| <del>-</del>  | e name of the corporation, when was the change eff   | fected under the laws of  |
| its jurisdiction of incorporati                             | on? FEBRUARY 18, 2015  |   |
| UMTB BIOMEDICAL, INC.                                       |  |   |
| (Name of corporation after the appropriate abbreviation, if | ne amendment, adding suffix "corporation," "comp<br>not contained in new name of the corporation)  | any," or "incorporated," or   |
| (If new name is unavailable in business in Florida)         | n Florida, enter alternate corporate name adopted fo   | r the purpose of transacting  |
| 5. If the amendment changes th                              | e period of duration, indicate new period of duratio   | n.  |
|   | (New duration)   | _   |
| . If the amendment changes th                               | e jurisdiction of incorporation, indicate new jurisdic   | ction.  |
|   | (New jurisdiction)   | _   |
| , LAD   | ocument of similar import, evidencing the amendment application to the Department of State, by the Se ecords in the jurisdiction under the laws of which i | ent, authenticated not more that<br>cretary of State or other officia<br>t is incorporated. |
| (Signature of director, pr                                  | esident or other officer - if in the hands   |   |

MICHAEL ROZMAJZL

(Typed or printed name of person signing)

SECRETARY

(Title of person signing)

Control No.: 14094481

## STATE OF GEORGIA

Secretary of State
Corporations Division
313 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

### CERTIFICATE OF NAME CHANGE

I, Brian P. Kemp, The Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

UMTB Acquisition Co., Inc.

### Name Changed To

UMTB Biomedical, Inc.

is hereby issued a CERTIFICATE OF NAME CHANGE under the laws of the State of Georgia on February 17, 2015 by the filing of all documents in the Office of the Secretary of State and by the paying of all fees as provided by Title 14 of the Official Code of Georgia Annotated.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on February 18, 2015



B:Ph

Brian P. Kemp Secretary of State