F43130

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(Au	u1033)	
(Cit	y/State/Zip/Phone	e #)
☐ PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nar	me)
•	,	,
	A.N	
(D0	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer	
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JUL 1 2 2021 A RAMSEY

COVER LETTER

TO: Amendment Section

Division of Corporation	ons		
NAME OF CORPORAT	ion:	Pharmac. F43136	y, Inc.
DOCUMENT NUMBER:		F 4313	0
The enclosed Articles of A	mendment and fee are sul	bmitted for filing.	
Please return all correspond	lence concerning this mat	tter to the following:	
	Idel Pl 3314 W. Tampa	Name of Contact Person AGENTE J. JA Firm/ Company Columbus Address Fl 336 City/ State and Zip Code ed for future annual report	Dr 507
For further information cor			nottication)
Illan S	U9107	at(_ <i>813</i>	<u>, 877-6679</u>
Name of Co	ntact Person		de & Daytime Telephone Number
Enclosed is a check for the	following amount made p	payable to the Florida Depa	urtment of State:
☐ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Division P.O. Box	ent Section of Corporations	Amend Divisio The Co	Address ment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

FILER

	incorporation of	, , , , , , , , , , , , , , , , , , ,	= <i>D</i>
Idel Pharmas	-	2027 JUN -9 p	
(Name of Corporation as curren			H12 13
F 43)	30	MINIST OF	37
	r of Corporation (if kn	iown)	TOWN.
	•		,
irsuant to the provisions of section 607.1006, Florida Statutes, the Articles of Incorporation:	as Florida Profit Corp	poration adopts the fol	lowing amendment
To B. And Annual Change	/		
. If amending name, enter the new name of the corporation:	NA		
me must be distinguishable and contain the word "corporation,"	, , ,		The new
ime must be distinguishable and contain the word—corporation, lnc.,'' or Co.,'' or the designation "Corp,'' "Inc,'' or "Co".	- company, or inco - A professional corp	poration name must i	eviation Corp., contain the word
chartered," "professional association," or the abbreviation "P.A		. 1 .	
Enter new principal office address, if applicable:		NIA	
rincipal office address <u>MUST BE A STREET ADDRESS</u>)	·		
			
. Enter new mailing address, if applicable:		11/1	
(Mailing address MAY BE A POST OFFICE BOX)		NA	
		,	
			·
. If amending the registered agent and/or registered office ad	ldress in Florida, ent	ter the name of the	
new registered agent and/or the new registered office addre	<u> </u>		
Name of New Registered Agent	10/1	-1-0	
	,		
	street address)		
New Registered Office Address:		Florida	
nen neganera vyja e manesa.	(City)		(Zip Code)
ew Registered Agent's Signature, if changing Registered Age hereby accept the appointment as registered agent. I am familia		abligations of the ros	itian
nereny accept the appointment as registered agent. Tam jamitta	т wun ана иссері іне	onigations of the pos	uon.
Signature of New	Registered Agent, if e	changing	
heck if applicable			
aeck ii addiicadie			

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	PT John	n Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One) 1) Change Add	Title	Idel Suarez	Address 306 PrveHRJ Seffner F1 33584
Remove 2) Change Add	<u>PTS</u>	Illan Svarez	524 W. Davis Blood
Remove 3) Change Add			
Remove 4) Change Add			
Remove 5) Change Add			
Remove 6)ChangeAdd			
_ Remove			

Attach additional sheets, if necessary). (
	ω /A
	<u> </u>
f an amendment provides for an exchan-	ge, reclassification, or cancellation of issued shares,
CO . P. 11 2. 15 4. 37/45	ment if not contained in the amendment itself:
(ij ain appacame, maicare 1071)	N/A
	/
	

. .

The date of each amendment(s) adoption	1: $\frac{May}{10}$, $\frac{202}{202}$, if other than the
date this document was signed.	
Effective date if applicable:	May 10, 2021 (no more than 90 days lifter amendment file date)
Note: If the date inserted in this block document's effective date on the Departme	bes not meet the applicable statutory filing requirements, this date will not be listed as the ent of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were adopted by action was not required.	y the incorporators, or board of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders was/were sufficien	y the shareholders. The number of votes east for the amendment(s) t for approval.
	by the shareholders through voting groups. The following statement oting group entitled to vote separately on the amendment(s):
"The number of votes cast for the	amendment(s) was/were sufficient for approval
bv	<u> </u>
, 	(voting group)
Dated	194 10, 2021
Signature	
(By a director,	president or other officer - if directors or officers have not been
	incorporator – if in the hands of a receiver, trustee, or other court inciary by that fiduciary)
appointed fide	
	Illan Duarez
	(Typed or printed name of person signing)
	President
	(Title of person signing)