L14000081606

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	<u>-</u>
(Cit	y/State/Zip/Phone	e#)
PICK-UP	TIAW [MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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IN HARRIS

COVER LETTER

Division of	f Corporations		
SUBJECT:	Life Science D	Pynamics USA ed Liability Company	LLC
The enclosed Article	es of Amendment and fee(s) are subm	nitted for filing.	
Please return all cor	respondence concerning this matter to	o the following:	
	<u>Avi</u> h	1. Zwelling Name of Person	
	Stern Z	welling, LLC Firm/Company	
	7280 W. Pa	almetto Park	Road St. 106-N
	BocaRato	City/State and Zip Code	33
		SZ Counsel. Co o be used for future annual report notif	
For further informa	tion concerning this matter, please ca	11:	
Fahim 1	Rahmani Jame of Person	at (<u>515</u>) <u>203</u> - Area Code Daytime	O837 e Telephone Number
Enclosed is a check	for the following amount:		
½ \$25.00 Filing F	Fee □ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Ce.tificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

(Name of the Limited Liability Company as (A Florida Limited Liability Company)	amics USA LLC thow appears on our records.)
The Articles of Organization for this Limited Liability Company were Florida document number <u>L1400081606</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability of	company here:
The new name must be distinguishable and contain the words "Limited Liability Co	mpany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	17
(Principal office address MUST BE A STREET ADDRESS)	
	—————————————————————————————————————
Enter new mailing address, if applicable:	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
New Registered Agent's Signature, if changing Registered Agent:	City Zip Code

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = A	uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Rahmani, Rafaot	7777 Glades Road, St. 100	Add
	•	Boca Ration, FL. 33434	H □ Remove
			☐ Change
AMBR	Zwelling, Avi M.	7280 W. Palmetro PK.Rd.	
		St.106-N	Remove
		Bosalaton, FL. 33433	
			🗆 Add
			Remove
			Change
			Add
			□ Remove
			Change
			Remove
			Change
			Add
			Remove
			☐ Change

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	· _	
E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date adocument's effective date on the Department of State's records.	Pursuant to 605.020 will not be listed as	7 (3)(b s the
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. (b) The 90th day after the record is filed.	on the earlier o	of:
Dated January 9, 2017.		
Dated January 9, 2017.	17	
	(Ca)	:
Signature of a member or authorized representative of a member		· · ·
Avi M. Zuelling		
Typed or printed name of signee		
	2: 25	
D 2 44	S	

Page 3 of 3

Filing Fee: \$25.00