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(R	equestor's Name)		
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O SIMMONS DEC 1 2 2020 October 28, 2020 Miami, Florida USA

Secretary of State Florida Department of State Division of Corporations

Dear Sir/Madam:

I hereby certify accepting the appointment as new registered agent for Mederez Pharmaceuticals LLC, Florida document number L19000036696 effective immediately.

Also, it serves as a certification that I am familiar and accept the obligations of a registered agent. Please proceed to amend the Articles of Organization for this Limited Liability Company.

Best regards

Jose R Perez-Rodrigyez

COVER LETTER

Registration Section
Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

TO:

MEDEREZ	PHARMACEUTICALS, LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	indence concerning this matter	to the following:			
	Jose R. Perez-Rodriguez				
		Name of Person			
	Mederez Pharmaceuticals,	LLC			
	· · · · · · · · · · · · · · · · · · ·	Firm/Company			
	9400 S Dadeland Blvd Sui	te 603			
		Address			
	Miami, Florida USA				
		City/State and Zip Code			
	joseperez@farmainternation		· **		
	E-mail address: (to be used for future annual report no	otification)		
For further information of	oncerning this matter, please c	all:			
Jose Percz		786 797-4448 at ()			
Name o	f Person	Area Code Dayti	me Telephone Number		
Enclosed is a check for the	he following amount:				
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	■ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Addres		Street Address: Registration S	ection		
Registration S Division of C		Division of Co			
P.O. Box 632			The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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MEDEREZ PHARMACEUTICAL			
(Name of the Limi	ted Liability Company as it now appears o (A Florida Limited Liability Company)	n our records.)	
The Articles of Organization for this Limited L Florida document number L19000036696		ary 5, 2019	and assigned
This amendment is submitted to amend the fol	owing:		
A. If amending name, enter the new name of	of the limited liability company here	:	
The new name must be distinguishable and contain the	words "Limited Liability Company," the design	gnation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and/or agent and/or the new registered office address.	registered office address on our reco	ords, enter the na	me of the new register
Name of New Registered Agent:	Jose R. Perez-Rodriguez		
New Registered Office Address:	Enter Florida	street address	
		, Florida _	
	City		Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 = Authorized Member

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<u>Title</u>	<u>Name</u>	Address	Type of Action
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P	Victor Medellin Herrera		🗆 Adđ
		9400 S Dadeland Blvd Suite 603 Miami, FL 33156	\(\exists Remove
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an effective date is	f other than the of s listed, the date must	be specific and	cannot be prior	to date of filing	or more than 90 d	ays after filing.) F	ursuant to 605.0207 (
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	 -	Signature of a n	nember or lumo	orized representa	ative of a member	<u> </u>	
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Filing Fee: \$25.00