TO 18502050380

rage I of I

Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H05000245375 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)205-0380

From:

Account Name : BUTZEL LONG Account Number : 105147001567 Phone : (561)368-2151 : (561)368-4668

Fax Number

## BASIC AMENDMENT

ANCER RESEARCH INSTITUTE FOR PERSONALIZED MEDI

| Certificate of Status |         |
|-----------------------|---------|
|                       | U U     |
| Certified Copy        | 1       |
| Page Count            | 02      |
| Estimated Charge      | \$43.75 |

Electropic Filips Menu

Conposate Filings

Public Access Held

https://efile.sunbiz.org/scripts/efilcovr.exe

10/17/200:

H05000245375 3

Articles of Amendment to Articles of Incorporation of

Cancer Research Institute For Personalized Medicine, Inc.

(Name of corporation as currently filed with the Florida Dept. of State)

N05000005145

(Document number of corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

## NEW CORPORATE NAME (if changing):

(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may not be used in the name of a not for profit corporation)

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article

| Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC) |          |
|--|----------|
| Article II . The principal place of business address is:                         |          |
| 9745 Arbor Oaks Lane, #302, Boca Raton, FL 33428                                 |          |
| The mailing address of the corporation is:                                       |          |
| 9858 Glades Road, #202, Boca Raton, FL 33434                                     |          |
|  |          |
|  |          |
|  |          |
|  |          |
|  | A4       |
|  |          |
|  |          |
|  | <u> </u> |
|  |          |

(Attach additional pages if necessary)
(continued)

H05000245375 3

| The date of a | doption of the                     | amendme:      | nt(s) was: Aus   | just ,     | 2005   | ·                       |
|---------------|------------------------------------|---------------|--|------------|--|-------------------------|
| Effective dat | e if <u>applicable</u> :           | August        | ,2005  |            |  |                         |
| • • • • • •   |                                    | (no m         | ore than 90 days   | after amen | dment file date)                             |                         |
| Adoption of   | Amendment(s)                       | Œ             | HECK ONE)  |            |  |                         |
|               | ne amendment(s)<br>r the amendment |               |  |            | ers and the num                              | ber of votes cas        |
|               | nere are no mem<br>nendment(s) was |               |  |            | n the amendmen<br>irectors.                  | it. The                 |
| Si            | gned this                          | o da          | y of August  |            | 2005   |                         |
| Q:            | N                                  | 6             | lili   | :/         |  |                         |
| Signat        | (By the chairms have not been :    | elected, by a | man of the boa<br>in incorporator- i<br>ary, by that fiduc | an the ha  | nt or other officer- inds of a receiver, tru | f directors<br>stee, or |
|               | Nicholas Canal                     | kakis         |  |            |  |                         |
|               | (**                                | Typed or prin | nted name of pers  | on signing | )  | ···                     |
|               | President                          |               |  |            |  |                         |
|               |                                    | (Title o      | f person signing)  |            |  | •                       |

FILING FEE: \$35