

N14000004406

(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:

Office Use Only



500269833665

03/17/15--01024--015 \*\*35.00

FILED  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

15 MAR 17 PM 2:00

RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

15 MAR 17 AM 9:33

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

C.L.  
3-18-15

**CT Corporation System**

515 E Park Avenue, Tallahassee, FL, 32301

850-205-8842

**NYGARD STEM CELL GENOMICS FOUNDATIONS, INC**

**N14000004406**


**\*\*\*PLEASE FILE FIRST\*\*\***

--

☐ Nonprofit  
☐ Domestic Corporation  
  
☐ Limited Partnership  
☒ LLC  
  
  
☒ Certified Copy  
  
  
☒ Walk In  
☐ Mail Out

☒ Amendment  
  
☐ Dissolution/Withdrawal  
☐ Reinstatement  
☐ Annual Report  
  
☐ Name Registration  
☒ Fictitious Name  
  
☒ Photocopies  
  
☐ Will Wait

☐ Merger  
  
☐ Mark  
  
☒ Other  
  
  
☒ CUS  
  
☐ After 4:30  
☒ Pick Up

Name \_\_\_\_\_  
Availability \_\_\_\_\_  
Document \_\_\_\_\_  
Examiner \_\_\_\_\_  
Updater \_\_\_\_\_  
Verifier \_\_\_\_\_  
W.P. Verifier \_\_\_\_\_

\_\_\_\_\_ 3/17/2015  
  
KM  
  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Order# \_\_\_\_\_  
**9456445**  
  
Ref#: \_\_\_\_\_  
  
Amount: \$ \_\_\_\_\_  
  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

CT Corporation System

515 E Park Avenue, Tallahassee, FL, 32301

850-205-8842

NYGARD STEM CELL GENOMICS FOUNDATIONS, INC

N14000004406

\*\*\*PLEASE FILE FIRST\*\*\*

☐ Nonprofit  
☐ Domestic Corporation  
☐ Limited Partnership  
☒ LLC  
  
☒ Certified Copy  
  
☒ Walk In  
☐ Mail Out

☒ Amendment  
☐ Dissolution/Withdrawal  
☐ Reinstatement  
☐ Annual Report  
  
☐ Name Registration  
☒ Fictitious Name  
  
☒ Photocopies  
  
☐ Will Wait

☐ Merger  
☐ Mark  
☒ Other  
  
☒ CUS  
  
☐ After 4:30  
☒ Pick Up

Name \_\_\_\_\_  
Availability \_\_\_\_\_  
Document \_\_\_\_\_  
Examiner \_\_\_\_\_  
Updater \_\_\_\_\_  
Verifier \_\_\_\_\_  
W.P. Verifier \_\_\_\_\_

KM

3/17/2015

Order#  
**9456445**

Ref#:

Amount: \$

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: NYGARD STEM CELL GENOMICS FOUNDATION, INC.

DOCUMENT NUMBER: N 1400000 4406

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

RICHARD M. WESTIN  
(Name of Contact Person)

SECRETARY, NYGARD STEM CELL GENOMICS FOUNDATION, INC.  
(Firm/ Company)

1917 Hart Rd.  
(Address)

Lexington, KY 40502  
(City/ State and Zip Code)

RWESTIN@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Richard Westin at ( 859 ) 268-1082  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>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

Articles of Amendment  
to  
Articles of Incorporation  
of

NYGARD STEM CELL GENOMICS FOUNDATION, INC.  
(Name of Corporation as currently filed with the Florida Dept. of State)

N1400000 4406

(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:

A. If amending name, enter the new name of the corporation:

STEM CELL GENOMICS FOUNDATION Inc The new  
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc."  
"Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1917 HART RD  
LEXINGTON, KY  
40502

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

(Florida street address)

New Registered Office Address:

\_\_\_\_\_, Florida \_\_\_\_\_  
(City) (Zip Code)

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

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

\_\_\_\_\_  
Signature of New Registered Agent, if changing

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
15 MAR 17 AM 9:33

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.

Example:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
2) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
3) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
4) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
5) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
6) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There is no text or other markings on the paper.

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
15 MAR 17 AM 9:34

Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☒ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated March 11, 2013

Signature \_\_\_\_\_  
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

RICHARD A. WESTIN  
(Typed or printed name of person signing)

SECRETARY  
(Title of person signing)