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Jud

R. WHITE SEP 27 2018 SECRETARY OF STATE

# COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: South Florida	Science Technology	gy and Robutes Institute Inc.
DOCUMENT NUMBER: # N 1600000 /	864	
The enclosed Articles of Amendment and fee are subm	nitted for filing.	
Please return all correspondence concerning this matter	r to the following:	
Wendell Bonaby Jr.		
1	(Name of Contact Persor	11
South Florida Science Technology	ana Robotics (Firm/Company)	Institute, Inc.
3600 Sarth State Rd 7 Suit	e#354	
	(Address)	
Miramar, FL 33023		
(	City/ State and Zip Code	2)
Info@ sathflorida star.		
For further information concerning this matter, please c	:all;	
Wendell Bonaby Jr.	a. 7	54 Z04 - 466/ ca Code) (Daytime Telephone Number)
(Name of Contact Person)	(Ar	ea Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made pay	rable to the Florida Depa	rtment of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address	Street	<u>Address</u>
Amendment Section		ment Section
Division of Corporations	Division of Corporations	

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

Articles of Amendment

FIL	ED
2018 SEP 25 SECRES /	AMILLO

	to	2018 550 -	~ •
	Articles of Incorporation of	- oth 52	AM II.
South Florida Science Tech	Indoguand Roboti	is Institute Alice	AMII: 38
(Name of Corporation	as currently filed with the Flo	orida Dept. of State)	SEE, FITE
#N/600000/			
(Docum	nent Number of Corporation (if	known)	
Pursuant to the provisions of section 617.1006, Flori amendment(s) to its Articles of Incorporation;	ida Statutes, this <i>Florida Not F</i>	or Profit Corporation adop	ots the following
A. If amending name, enter the new name of the	corporation:		
name must be distinguishable and contain the word "Company" or "Co," may not be used in the name		ed" or the abbreviation "Co	The new orp " or "Inc."
B. Enter new principal office address, if applical	bte:		
(Principal office address MUST BE A STREET AI			
	<del></del>		<del></del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E	<u> </u>		
	<del>****</del>		
D. If amending the registered agent and/or regist new registered agent and/or the new registered		a, enter the name of the	
<u>Name of New Registered Agent</u> :			
New Registered Office Address:	(	Florida street address)	
		, Florida	
	(City)	Zip Coa	
New Registered Agent's Signature, if changing R	enistered Auent		
I hereby accept the appointment as registered agent		ot the obligations of the posi	ition.
_		<del></del>	
	Signature of New Regi	stered Agent, if changing	

If aimending 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: X.Change X.Remove X.Add	V Mik	n Doe te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
D Change Add Remove	<u>P</u> _	Doris Bomby	1025 NW 1554hland Apt 204 MIGMIFL 33169
2) Change Add Remove			
3 ) Change Add Remove			
4) Change Add Remove	<del></del>		
51 Change Add			
Remove 6) Change Add			
Remove			

L. <u>If amending or adding</u> (attach additional sheets	s. if necessary). (I	Be specific)			
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The date of each amendment(s) ado		, if other than the
date this document was signed.  Effective date <u>if applicable</u> :	09/20/2018	
interior date di applicante.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depa	does not meet the applicable statutory fifing requirement of State's records.	ints, this date will not be fisted as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopwas/were sufficient for approval.	oted by the members and the number of votes cast for the	ne amendment(s)
☐ There are no members or member adopted by the board of directors	rs entitled to vote on the amendment(s). The amendmen	nt(s) was/were
Dated	9/20/2018	
Signature	nalla	
have not been	an or vice chairman of the board, president or other offi selected, by an incorporator – Unit he hands of a receive pointed fiducial by that fiduciary)	
$\omega$	endell Bonaby Tr. (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
<i>F</i>	resident	
	(Title of person signing)	

## 2018 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N16000001864

Entity Name: SOUTH FLORIDA SCIENCE TECHNOLOGY AND ROBOTICS

INSTITUTE, INC.

Apr 13, 2018 Secretary of State CR9471120454

**FILED** 

### Current Principal Place of Business:

1728 N.E. MIAMI GARDENS DRIVE

102

NORTH MIAMI BEACH, FL 33179

### **Current Mailing Address:**

1728 N.E. MIAMI GARDENS DRIVE

102

NORTH MIAMI BEACH, FL 33179

FEI Number: APPLIED FOR

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

JACKSON, EMMA J 20879 N.W. 9TH COURT APT, 106 MIAMI, FL 33169 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida

SIGNATURE: EMMA J JACKSON

04/13/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title

PRES

\_

Γιtle

TRES

Name

BONABY, WENDELL JR

Name

ROLLE, TONYA

Address

1728 N.E. MIAMI GARDENS DRIVE SUITE 102 Address

1441 N.E. 132ND ROAD

City-State-Zip:

NORTH MIAMI BEACH FL 33179

City-State-Zip:

NORTH MIAM! FL 33161

Title

SEC

Name

TOOMBS, ANNIE

Address

2375 N.W. 171ST TERRACE

City-State-Zip

MIAM! FL 33056

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signatum shall have the same signal effect as it make under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617. Florida Statutes, and that my mamin appears above, or on an attachment with all other like empowered.