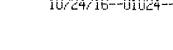
N16000006762

(Re	questor's Name)	
- (Ad	dress)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	Killallcancer, Inc					
	N16000006762					
DOCUMENT NUMBER:						· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of An	nendment and fee are subm	nitted for filing.				
Please return all corresponde	ence concerning this matter	r to the following:				
Jeff Jordan						
		(Name of Contact	Person)			
		(Firm/ Compa	any)			<u> </u>
3187 Lorenzo Lae						
		(Address)				
Woodbine, MD 21797						
		(City/ State and Z	ip Code)			
jeffsteven2@yahoo.com						
	-mail address: (to be used	for future annual	report no	tification)	
For further information cond	eming this matter, please of	call:	•			
Jeff Jordan			443 at		6909001	
	(Name of Contact Person))		Code)	(Daytime Teleph	one Number)
Enclosed is a check for the f	ollowing amount made pay	yable to the Florid	a Depart	ment of S	tate:	
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing F Certified Copy (Additional cop enclosed)		Certific Certific	Filing Fee cate of Status ed Copy ional Copy is sed)	

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

Killallcancer, Inc		
(Name of Corporation as curr	ently filed with the Florid	la Dept. of State)
N16000006762		`£'
(Document Nu	mber of Corporation (if kno	own)
Pursuant to the provisions of section 617.1006, Florida Stat amendment(s) to its Articles of Incorporation:	tutes, this Florida Not For	Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor	ration:	
N/A		The man
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	oration" or "incorporated"	The new or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	N/A	
(Principal office address <u>MUST BE A STREET ADDRES</u>	<u>55</u>)	· · · · · ·
		·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
		 .
D. If amending the registered agent and/or registered o	ffice address in Florida, e	nter the name of the
new registered agent and/or the new registered offic	e address:	
Name of New Registered Agent: N/A		
New Registered Office Address:	(Flor	ida street address)
N/A		
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	ed Agent:	•
	Signature of New Register	red Agent, if changing



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: X.Change X.Remove X. Add	<u>V Mik</u>	n Doe te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	Victoria Gunvalson	30021 Tomas, #200
Add			Rancho Santa Margartia
X Remove			California 92688
2) Change		·	
Add			
Remove			
3) Change	***************************************		
Add			
Remove			
4) Change	<u></u>		
Add			·
Remove			
5) Change			
Add			
Remove			·
6) Change			
Add			·
Remove			

E. If amending or adding additional Article (attach additional sheets, if necessary).	(Be specific)
N/A	•

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THE RESIDENCE OF THE PROPERTY	
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	·
	

	e date of each amend		if other than the
date	e this document was s	gned.	
Effe	ective date <u>if applica</u>		
		(no more than 90 days after amendment file date	2)
		in this block does not meet the applicable statutory filing requirement on the Department of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)		t(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were sufficient	vas/were adopted by the members and the number of votes cast for for approval.	the amendment(s)
	There are no memb adopted by the boar	rs or members entitled to vote on the amendment(s). The amendment of directors.	nent(s) was/were
	Dated	0/17/16	
	Signature _	Jr Jale	
	ļ	by the chairman or vice chairman of the board, president or other of avenot been selected, by an incorporator – if in the hands of a receiver appointed fiduciary by that fiduciary)	fficer-if directors eiver, trustee, or
		Jay R. Jordan	
		(Typed or printed name of person signing	g)
		President	
		(Title of person signing)	