Division of Corporations **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.

(((H180003416083)))



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)617-6380

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

DEC 0 3 2018

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one amail address.

Email Address:_____

COR AMND/RESTATE/CORRECT OR O/D RESIGN PROJECT CARDIO INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

Electronic Filing Menu Corporate Filing Menu

Help

Articles of Amendment to Articles of Incorporation of

Project Cardio Inc.			
(Name of Corporation as	s currently filed with the	Florida Dept. of State)	
N18000002959			
(Docume	nt Number of Corporation	(if known)	
Pursuant to the provisions of section 617,1006, Florid unendment(s) to its Articles of Incorporation:	a Statutes, this <i>Florida Ne</i>	ot For Profit Corporation add	pts the following
. If amending name, enter the new name of the co	orporation:		
awa muut ka distassi idi.tt			The new
ame must be distinguishable and contain the word "o Company" or "Co." may not be used in the name.	corporation" or "incorpo	rated" or the abbreviation "C	orp." or "Inc."
L. Enter new principal office address, if applicable Principal office address <u>MUST BE A STREET AD</u> L	ORESS)		
			20/8 HOV 30 AM 8: 20
		_	1.6
Enter new mailing address, if applicable:			2
(Mailing address MAY BE A POST OFFICE BO	(X)		38
			Co.
			
If amending the registered agent and/or register	ed office address in Flor	ida, enter the name of the	0:
new registered agent and/or the new registered	office address:		
Name of New Registered Avent:			
New Registered Office Address:		(Florida street address)	
_		, Florida	
	(City)	Florida, Florida(Zip Coa	<u> </u>
w Registered Agent's Signature, if changing Regi	stered Agent:		
ereby accept the appointment as registered agent.	l am familiar with and acc	ept the obligations of the posi	tion.
	Signature of New Pa	gistered Agent, if changing	
	Signal of their he	swierea rigeni, if changing	

Page 1 of 4

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 = ChiefExecutive 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>Pr</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change		_	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			· · · · · · · · · · · · · · · · · · ·
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
			
O) Change			
Add			
Remove			
		Page 2 of 4	

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
Article III: Project Cardio is organized exclusively for charitable, religious, educational and
scientific purposes, including, for such purposes, the making of distributions to organizations that qualify
as exempt organizations described under Section 501(C)(3) of the Internal Revenue Code, or
corresponding section of any future federal tax code.

the date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amend was/were sufficient for approval.	lment(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) was adopted by the board of directors.	/were
Dated November 29, 2018	
Signature	
(By the chairman of vice phairman of the board, president or other officer-if direction have not been selected, by an incorporator – if in the hands of a receiver, trusted other court appointed fiduciary by that fiduciary)	ectors ce, or
James Price	
(Typed or printed name of person signing)	
Director	
(Title of person signing)	