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TO: Amendment Section

Division of Corporations		
NAME OF CORPORATION: KRS Glob DOCUMENT NUMBER: P01000038	oal Bio Techno 423	ology, Inc.
The enclosed Articles of Amendment and fee are su	abmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Bruce Jay Tola	and, Esquire	
Bruce Jay Tola		n
80 S.W. 8th St	Firm/ Company reet, #2805	
Miami, FL 331	Address 30	
***************************************	City/ State and Zip Cod	e
E-mail address: (to be u	sed for future annual report	notification)
For further information concerning this matter, plea	se call:	
Bruce Jay Toland	at (305	<sub>3</sub> 810-5957
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address  Amendment Section  Division of Corporations	Amend	Address Iment Section

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## **Articles of Amendment** to Articles of Incorporation

## KRS Global Bio Technology, Inc. (Name of Corporation as currently filed with the Florida Dept. of State)

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(Document Number of Corporation (if	`known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this a its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
KRS Global Biotechnology, Inc.	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "word "chartered," "professional association," or the abbreviation ".	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2015 F
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stra	ret 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 w	
Signature of New Registered A	gent, 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	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change		_		
<u></u> ∆dd				
Remove				
2) Change		_	- , , , , , , , , , , , , , , , , , , ,	
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
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Remove				,
5) Change		_		
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Remove				
6) Change		_		
Add Add				
Remove				

ttach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
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	199-1800-0-1
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	···
an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
rovisions for implementing the ame	adment if not contained in the amendment itself:
rovisions for implementing the ame	ndment if not contained in the amendment itself:
rovisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
rovisions for implementing the ame	endment if not contained in the amendment itself:
rovisions for implementing the ame	endment if not contained in the amendment itself:
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rovisions for implementing the ame	endment if not contained in the amendment itself:

The date of each amendment(s) adoption:	_, if other than the
Effective date if applicable: February 3, 2015	
(no more than 90 days after amendment file date)	_
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated February 3, 2015	
Signature	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
Mirtha Fonte-Okunski	
(Typed or printed name of person signing)	_
Secretary	
(Title of person signing)	_