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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: B&G Diagnostic S	ervices inc.	<u> </u>	
DOCUMENT NUM	BER: P03000116738		<u></u>	
The enclosed Article:	s of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following:		
	Raquel Leon, Esq.			
		Name of Contact Person	1	
	Leon Law Office, P.A.			
		Firm/ Company		
	3785 NW 82 Ave, # 417			
		Address		
	Doral, FL 33166			
		City/ State and Zip Cod	e	
	Raquel Leon <raquel@leonla< td=""><td>awgroup.com></td><td></td></raquel@leonla<>	awgroup.com>		
		sed for future annual report	notification)	
For further information	on concerning this matter, plea:		477-7000	
Name of Contact Person		Area Co	_) 477-7000 de & Daytime Telephone Number	
Enclosed is a check f	or the following amount made	payable to the Florida Dep	artment 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 Amendment Section		Street Address Amendment Section		
	vision of Corporations		on of Corporations	
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

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Articles of Amendment to Articles of Incorporation of

B&G Diagnostic Services Inc.			
(Name o	f Corporation as current	ly filed with the Florida Dept. of State)
P03000116738			
	(Document Number o	f Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the f	ollowing amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Contain "chartered," "professional association,"	"orp," " $"Inc,"$ or " $"Co"$	A professional corporation name must	previation "Corp.,"
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>			
			
C. Enter new mailing address, if appli			20?0
(Mailing address <u>MAY BE A POST (</u>	<u>OFFICE BON</u>)	 	——————————————————————————————————————
			<u>-</u>
			
D. If amending the registered agent an	d/or registered office add	ress in Florida, enter the name of the	<u> </u>
new registered agent and/or the new			9: 04
Name of New Registered Agent	Ricardo Villamil		F
	444 West 51	Pkace	
	(Florida st	reet address)	
New Registered Office Address:	Hialean	Florida	33012
nes deginered office radices.		(Cuy)	(Zip Code)
New Registered Agent's Signature, if cl I hereby accept the appointment as registe	ered agent. I am familiar	ii with and accept the obligations of the po expistered Agent, if changing	osition.
		/s	
Check if applicable ☐ The amendment(s) is/are being filed positive amendment is a second positive amendment is a second positive amendment in the second positive amendment is a second posi	ursuant to s. 607.0120 (11)	(e). F.S.	

Af it

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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	D	Concepcion Torres	20021 NW 64 CT.
Add			Miami, FL 33015
X Remove			
2) Change	D	Ricardo Villamil	444 West Si Place
XAdd			Hialean, Florida 33012
Remove Change			
Add			
Remove			
4) Change	_		
Add			
Remove			
5) Change	_		
Add			
Remove			
6) Change			
Add			
Remove			

and

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(Attach additional sh	neets if necessary)	ticles, enter chang (Be specific)	ects) nere.			
(Macii dadiinima sii	ects, y necessary,	Tive apreciate				
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		<u> </u>			<u>. </u>	
F. <u>If an amendment p</u>	ravidae for an ava	hungo raplaccific	estion or cancell	ntion of icenad cl	narae	
provisions for imn	elementing the amount	endment if not co	entained in the a	mendment itself:		
provisions for imp (if not applicat	ole, indicate N/A)				-	
- -						
				·		-
		•				

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The date of each amendment(s) add	ption:	, if other than th
late this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment fi	
	(no more than 90 days after amendment fi	ile date)
Note: If the date inserted in this blo locument's effective date on the Dep	ock does not meet the applicable statutory filing requartment of State's records.	irements, this date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adop action was not required.	ted by the incorporators, or board of directors without	shareholder action and shareholder
The amendment(s) was/were adop by the shareholders was/were suf	ted by the shareholders. The number of votes cast for ficient for approval.	the amendment(s)
	oved by the shareholders through voting groups. The ach voting group entitled to vote separately on the am	
"The number of votes cast for	or the amendment(s) was/were sufficient for approval	
by	·	•
	(voting group)	
June 12, 202 Dated	0	
Signature	- my my	
selected.	ector, president or 6ther officer – if directors or officer by an incorporator – if in the hands of a receiver, trus d fiduciary by that fiduciary)	
(Concepcion Torres .	
-	(Typed or printed name of person signing)	
İ	Director	

(Title of person signing)

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