P04000051106

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2022 HAY 31 - AH 7: 5

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TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Boomer Medics In	c.	
DOCUMENT NUM	BER: P04000051106		
	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	Kiko Serrano		
		Name of Contact Person	
	Boomer Medics Inc.		
		Firm/ Company	
	3389 Sheridan St. # 468		
		Address	
	Hollywood, FL 33021		
		City/ State and Zip Code	<u> </u>
	kiko@hiotec-americas.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, plea	se call:	
Kiko Serrano		305 at 1	de & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check t	or the following amount made	payable to the Florida Depa	artment of State:
S35 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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

of

2022 HAY 31 AM 7: 56

Boomer Medics Inc.	2022 mAT 31 ATT 7:5
(Name of Corporation as o	currently filed with the Florida Dept. of State)
P04000051106	·· '
(Document N	umber of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statuits Articles of Incorporation;	ntes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpora	ation:
Biotec Americas Inc.	The new
name must be distinguishable and contain the word "corpora" Inc., "-or-Co.," or-the-designation "Corp," "Inc," or "chartered," "professional association," or the abbreviation	tion," "company," or "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	N/A
(Principal office address <u>MUST BE A STREET ADDRESS</u>	<u>S</u>)
C. Enter new mailing address, if applicable:	N/A
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
to the second control of the second of the s	The address in Planta and a share and a first
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	
N/A	
Name of New Registered Agent	
	Florida street address)
	Torida street adaress)
New Registered Office Address:	City , Florida , (Zip Code)
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registere	ed Agent:
Thereby accept the appointment as registered agent. Tam f	
W-A	
Nienature (of New Registered Agent, if changing

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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)

Example:

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 Doc 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 Doc. PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) N/A Change			
Add			
Remove			
2) N/A Change			
Add			
Remove 3.) N/A Change			
Add			
Remove			
4) N/A Change			
Add			
Remove			
57 N/A Change			
A d d			
Remove			
6) N/A Change			
Add			
			
Remove			

	ional sheets, if necess	ary). (Be specific)			
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If an amend	ment provides for a	n exchange, reclassific	cation, or cancellatio	on of issued shares,	
provisions	for implementing th	e amendment if not co	ontained in the amer	ndment itself:	
(if not c	applicable, indicate N	`A)			
A					
			-		
				_	
			• • •	-	

•	5/24/2022	
The date of each amendment(s)	adoption:	, if other than t
late this document was signed.	,	
	24/2022	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this locument's effective date on the I	block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be fisted as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	ı
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
hy		
•••	 (voting group)	
	director, president or other officer – if directors or officers have not been	
	ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	Kiko Serrano	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	