Po4000131543

(F	Requestor's Name)		
(A	Address)		
(A	Address)		
(0	City/State/Zip/Phone #)		
PICK-UP	WAIT MAIL		
(E	Business Entity Name)		
(E	Occument Number)		
Certified Copies	Certificates of Status		
Special Instructions to Filing Officer:			

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SECRETARY OF SIME BIVISION OF CORPORATION

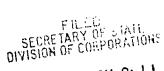
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Brain Matte	ers Research Ind	>.	
DOCUMENT NUME	BER: P0400013154	3		
	of Amendment and fee are su			
Please return all corres	pondence concerning this ma	tter to the following:		
	Lynn Brody			
		Name of Contact Person)	
	Brain Matters Re	search Inc		
		Firm/ Company		
	2765 Avenue Au	Soleil		
		Address		
	Gulfstream, FL 3	3483		
		City/ State and Zip Cod	e	
lbro	ody@brainmatters	research.com		
	• —	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
Lynn Brody		_{at (} 561	702-0257	
Name o	of Contact Person		de & Daytime Telephone Number	
Enclosed is a check for	r the following amount made	payable to the Florida Depa	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		· · · · · · · · · · · · · · · · · · ·	Address Iment Section	
	sion of Corporations	Division of Corporations		
	Box 6327 ahassee, FL 32314	Clifton Building 2661 Executive Center Circle		
I dili	шаэж, FD 32314		assee, FL 32301	

Articles of Amendment to Articles of Incorporation of



Brain Matters Research Inc

15 FEB -9 AM 8: 11

(Name of Corporation as	currently filed with the Flo	rida Dept. of State)		
P04000131543				
(Documen	t Number of Corporation (if k	(nown)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>Fl</i>	lorida Profit Corporation adop	ts the following an	nendment(s) to
A. If amending name, enter the new na	me of the corporation:			
n/a			The	e new
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associated	ation "Corp," "Inc," or "Co	o". A professional corporatio	ted" or the abbre	viation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		800 NW 17th Ave)	
		Delray Beach, FL	33445	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		n/a		
D 16				
D. If amending the registered agent and new registered agent and/or the new		is in Florida, enter the name (of the	
Name of New Registered Agent	n/a			
	(Florida stree	t address)		
New Registered Office Address:		, Florida		
	(City)		(Zip Code)	
New Registered Agent's Signature, if ch I hereby accept the appointment as registe		th and accept the obligations o	f the position.	
Cin	gnature of New Registered Ag	aut if abanaina		
ડાયુ	manire oj New Kegisierea Ag	eni, ij 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>e</u>		
X Remove	<u>v</u>	Mike Jo	nes		
_X Add	<u>sv</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	Title		Name		Address
1) Change			n/a	-	
Add					
Remove					
2) Change		_			
Add					
Remove					
3) Change		_		_	
Add					
Remove					
4) Change				-	
Add					
Remove					
5) Change		_		-	
Add					
Remove					
6) Change				_	
Add					
Remove					

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W-1	
	(14 to 10 to
	hange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
1	

The date of each amendment(s) adoption:	FILEO SECRETARY OF STATE SECRETARY OF CORPORATIONS DIVISION OF CORPORATIONS	_, if other than the
date this document was signed. Effective date if applicable:	15 FEB -9 AH 8: 11	
песиче выс <u>и арунсави</u> с.	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s) (CI	HECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of votes cast for the amendment(s) approval.	
	the shareholders through voting groups. The following statement g group entitled to vote separately on the amendment(s):	
"The number of votes cast for the ame	endment(s) was/were sufficient for approval	
by	oting group)	
action was not required.	e board of directors without shareholder action and shareholder incorporators without shareholder action and shareholder	
selected, by an inc	sident or other officer – if directors or officers have not been corporator – if in the hands of a receiver, trustee, or other court by by that fiduciary) (Typed or printed name of person signing)	idut

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