P07000093987

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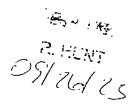




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FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached is a form for filing *Articles of Amendment* to amend the articles of incorporation of a *Florida Profit Corporation* pursuant to section 607.1006, Florida Statutes. This is a basic amendment form and may not satisfy all statutory requirements for amending.

A corporation can amend or add as many articles as necessary in one amendment.

- > The original incorporators cannot be amended.
- If amending the name of the corporation, the new name must be distinguishable on the records of the Florida Department of State. A preliminary search for name availability can be made through the Division's website at www.sunbiz.org. You are responsible for any name infringement that may result from your corporate name selection.
- > If amending the registered agent, the new agent must sign accepting the appointment and state that he/she is familiar with the obligations of the position.
- If amending/adding officers/directors, list titles and addresses for each officer/director.
- > If amending from a general corporation to a professional corporation, the purpose (specific nature of business) must be amended or added if not contained in the articles of incorporation.

If a section is not being amended, enter N/A or Not Applicable. The document must be typed or printed and must be legible.

Pursuant to section 607.0123, Florida Statutes, a delayed effective date may be specified but may not be later than the 90th day after the date on which the document is filed.

| (Filing Fee) | (\$35.00)(Includes a letter of acknowledgmen | t) |
|--------------|--|----|
|--------------|--|----|

Certified Copy (optional) \$8.75

Certificate of Status (optional) \$8.75

Send one check in the total amount made payable to the Florida Department of State.

Please include a letter containing your telephone number, return address and certification requirements, or complete the attached cover letter.

Mailing Address'
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

For further information you may call the Amendment Section at (850) 245-6050

CR2E011 (1/20)

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR | ATION: BABYLON CLIN | IC INC | |
|--|---|--|---|
| DOCUMENT NUMB | 0.0000000000000000000000000000000000000 | | |
| The enclosed Articles of | f Amendment and fee are su | bmitted for filing. | |
| Please return all corresp | oondence concerning this ma | atter to the following: | |
| | | EUGEN LUIS | |
| - | | Name of Contact Person | <u>n</u> |
| | BABY | LON CLINIC INC | |
| - | - | Firm/ Company) | |
| | 351 NW | Address FL 33126 City/ State and Zip Cod | Ste 102 |
| _ | - | Address | |
| | MIAM | ; FL 33126 | 20 |
| _ | | City/ State and Zip Cod | 2023 2-7 |
| | 100/1/6 | | |
| - | F-mail address: (to be us | ic @ Gmail Con sed for future annual report | notification) |
| | is-mair address. (to be a. | sed for rature annual report | راioniteation) تت |
| For further information | concerning this matter, please | se call: | PH12: 40 |
| EUGEN LUIS | | at (305 | 643-8130 |
| N <u>a</u> me o | f 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: |
| S35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | S43.75 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 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

0000 V 10 00 TRANS FU

Articles of Amendment to Articles of Incorporation of

BABYLON CLINIC INC

| (Name of Corporation as curren | tly filed with the Florida Dept. of State) |
|---|--|
| 107000093987 | |
| (Document Number | of Corporation (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation: | s Florida Profit Corporation adopts the following amendment(s) |
| A. If amending name, enter the new name of the corporation: | |
| N/A | The new |
| name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A. | "company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word |
| B. Enter new principal office address, if applicable: | 351 NW 42 AVE Suite 102 |
| (Principal office address MUST BE A STREET ADDRESS) | 351 NW 42 AVE Suite 102 Miami FL 33126 |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 N/A | |
| | treet address) Florida |
| New Registered Office Address: | (City), Florida (Zip Code) |
| New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar | PR12: 40 |
| Signature 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)

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 | | |
| <u>X</u> Add | <u>sv</u> | Sally Smith | | |
| Type of Action (Check One) | <u>Title</u> | Name | Address | |
| 1) Change | | | N/A | |
| Add | | | | |
| Remove | | | | |
| 2) Change | | | | |
| Add | | | 2023 | |
| Remove 3) Change | | | ίτ τ | |
| 3) Change | | _ | | • : |
| Add | | | P# 12: | |
| Remove | | | | : |
| 4) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 6) Change | | | | |
| Add | | | | |
| Remove | | | | |

| E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) | | |
|---|----------|------------|
| N/A | | |
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| F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, | | |
| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | | |
| N/A | | |
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| The date of each amendment(s) date this document was signed. | adoption: | , if other than the |
|---|---|---|
| Effective date <u>if applicable</u> : | (no more than 90 days after amendmer | t file date) |
| Note: If the date inserted in this document's effective date on the l | block does not meet the applicable statutory filing redepartment of State's records. | quirements, this date will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| ☐ The amendment(s) was/were a action was not required. | dopted by the incorporators, or board of directors with | out shareholder action and shareholder |
| The amendment(s) was/were a by the shareholders was/were | dopted by the shareholders. The number of votes cast sufficient for approval. | for the amendment(s) |
| | oproved by the shareholders through voting groups. The each voting group entitled to vote separately on the | |
| "The number of votes ca | st for the amendment(s) was/were sufficient for approv | al |
| by | (voting group) | 0:41) 2029 S |
| Dated | 9.19.2023 El | 1998 SEP 26 P |
| Signature | -0- | |
| selec | director, president or other officer – if directors or offi ed, by an incorporator – if in the hands of a receiver, t nted fiduciary by that fiduciary) | |
| | EUGEN LUIS, M | <i>D</i> |
| | (Typed or printed name of person signing |) |
| | PRESIDENT | |
| | (Title of person signing)) | |