P08000081869

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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

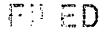
NAME OF CORPOR	ATION:	EW PHARMA, INC.			
DOCUMENT NUMBI	:R:				
The enclosed Articles of	Amendment and fee are su	abmitted for filing.			
Please return all corresp	ondence concerning this ma	atter to the following:			
		REY FARINAS			
	Name of Contact Person				
		NEWPHARMA INC.			
		Firm/ Company			
		3307 NW 74TH AVENUE			
_	Address				
	MIAMI, FL 33122				
		City/ State and Zip Code	2		
ın	castaneda@newpharmainc.	com			
-	E-mail address: (to be us	sed for future annual report	notification)		
For further information of	concerning this matter, pleas	se call:			
REY FARINA		at (305	592-9216		
Name of	Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for t	he following amount made	payable to the Florida Depa	urtment 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

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NEW PHARMA, INC. (Name of Corporation as currently filed with the Horida Depl. of State) 58 P08000081869 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: NEWPHARMA INC. name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 Doc	
\underline{X} Remove	<u>Y</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1)Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	sheets, if necessary).	(Be specific)			
					
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The date of each amendment(s) addate this document was signed.	loption:	, if other than the
Effective date if applicable:	JUNE 2, 2022	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bidocument's effective date on the De	ock does not meet the applicable statutory filing requirements, partment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without sharehold	er action and shareholder
The amendment(s) was/were ado by the shareholders was/were sur	oted by the shareholders. The number of votes cast for the ameno ficient for approval.	lment(s)
☐ The amendment(s) was/were app. must be separately provided for a	roved by the shareholders through voting groups. The following spach voting group entitled to vote separately on the amendment(s)	tatement 1:
"The number of votes cast t	or the amendment(s) was/were sufficient for approval	
by	w.	
	(voting group)	
selectéd	ector, president or other officer – if directors or officers have not by an incorporator – if in the hands of a receiver, trustee, or other diffiduciary by that fiduciary)	been r court
	MARGARITA FARINAS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	



August 24, 2022

REY FARINAS 3307 NW 74TH AVENUE MIAMI, FL 33122

SUBJECT: NEW PHARMA, INC. Ref. Number: P08000081869

We have received your document for NEW PHARMA, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

This document was previously filed on September 25, 2008.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 222A00018807

Anissa Butler Regulatory Specialist II

www.sunbiz.org