## Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : BUSINESS SUPPORT USA

Account Number : 120120000073

Phone Fax Number

: (305)364-8824 : (305)456-2910

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:	

## COR AMND/RESTATE/CORRECT OR O/D RESIGN BIO HELPER CORP

Certificate of Status	0
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JUL 13 2014

Electronic Filing Menu

Corporate Filing Menu

## COVER LETTER

Division of Corp						
NAME OF CORPO	RATION: BIO HELPER COL	RP				
DOCUMENT NUMBER: P13000002609						
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.				
Please return all corre	espondence concerning this ma	tter to the following:				
	NELSON ODELLA					
		Name of Contact Person	ı			
	PRESIDENT					
		Firm/ Company				
	しゅうえん とけいしょく ぐつぎ					
		Address				
MIRAMAR, FL 33027						
City/ State and Zip Code						
LENSUR-ACCOUNTING@LIVE.COM						
	12 Sept. addisons /12 Sept. 10	and for future annual corner	notification)			
	E-man address. (in he di	sed for rature annual report				
For further information	on concerning this matter, pleas	se cali:				
NELSON ODELLA		at (305	3648824			
Name	of Contact Person	at (305 ) 3648824  Area Code & Daytime Telephone Num				
Enclosed is a check f	or the following amount made	payable to the Florida Depa	urtment of State:			
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	O\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
M	ailin <u>e Address</u>	Street	Address			
An	nendment Section	Amend	lment Section			
	vision of Corporations		on of Corporations			
	D. Box 6327 Habassec, FL 32314		Building Executive Center Circle			
1.5	HMHMSSCC, PT. 34314	4001 L	ACCULIVE CORRECT CREIC			

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State)  P13000002609  (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 its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:					
(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 its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  The new 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)  MIAMI BEACH, FL 33139  C. Enter new muiling address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  MIAMI BEACH, FL 33139					
Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  The new 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 grincipal office address, if applicable; (Principal office address MUST BE A STREET ADDRESS)  MIAMI BEACH, FL 33139  C. Enter new muiling address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  MIAMI BEACH, FL 33139					
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(Mailing address MAY BE A POST OFFICE BOX)  MIAMI BEACH, FL 33139					
MIAMI BEACII, FL 33139					
	, 				
D. If amending the registered agent and/or registered office address in Florida, enter the name of the	4 0. 0 h				
Name of New Registered Agent					
(Florida street address)					
New Registered Office Address:					
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

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; To 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> <u>Joh</u>	nn Duc	
X Remove	<u>y</u> <u>M</u> )	ke Jones	
<u>X</u> Add	SY Şal	ly Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	P/S	NELSON ODELLA	13360 NW 46 CT
			MIRAMAR, FL 33027
2) Change	P/S	LAURA PERDOMO	407 LINCOLN RD STE III I
X Add			MIAMI BEACH, FL 33139
Remove			***************************************
3) Add			
Remove			
4) Change			- 11.
Add			
S) Change	***************************************		
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6) Change	<del></del>		±
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Remove			

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		exchange, reclas	ssification, or car	ncellation of issu	ed shares.	
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rovisjons for in	nplementing the	amendment if n	ot contained in the	e amendmept it	<u> </u>	
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<u>provisions for in</u>	nplementing the	amendment if n	of contained in the	e amendment i	3t.II.	
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<u>rovisjons for in</u>	nplementing the	amendment if n	of contained in the	e amendment it	3411.	

7/10/2015 13:21 FAX 305456	2910 B		<b>2</b> 006
	0/2015		, if other than the
Effective date if applicable:	(no more than 90 d	ays after amendment file date)	· <del></del> ,, •
Note: If the date inserted in this b document's effective date on the De		le statutory filing requirements, this date	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were ado by the shareholders was/were su		imber of votes east for the amendment(s)	
		h voting groups. The following statemen e separately on the amendment(s):	ı
"The number of votes cast	for the amendment(s) was/were s	ufficient for approval	
by	(voting group)	77	
	(voting group)		
The amendment(s) was/were ado action was not required.	pted by the board of directors wi	thout shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	pted by the incorporators withou	t shareholder action and shareholder	
07/10/2015 Dated Signature	deld	<b></b>	
(By a d selecte		- if directors or officers have not been ands of a receiver, trustee, or other court	
	NELSON ODELLA		

(Typed or printed name of person signing)

(Title of person signing)

PRESIDENT