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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: Easy Lab Tests No	ow (Amending back to PRN	Services, Inc.)
DOCUMENT NUM	P13000017653		
The enclosed Article.	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	Donna L. Simpson		
		Name of Contact Person	1
	Easy Lab Tests Now		
		Firm/ Company	
	171 Kingsbrook Ave	. ,	
		Address	
	Ann Arbor, MI 48103		
		City/ State and Zip Code	c
don	na@easylabtestsnow.com		
	-	sed for future annual report	notification)
For further information	on concerning this matter, plea	se call:	
Donna Simpson		239	281-0567
Name of Contact Person Area Code & Daytime Telephon		de & Daytime Telephone Number	
Enclosed is a check f	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)
An Div P.C	nailing Address mendment Section vision of Corporations D. Box 6327 Hahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Easy Lab Tests Now , INC .

(Name of Corporation as current	ly filed with the Florida Dept. of State)
P13000017653	,
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
PRN Services, Inc.	The new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	not applicable
	20/
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	not applicable
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres	
Name of New Registered Agent not applicable	
(Florida st	reet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	
Signature of New I	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; 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>Y</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<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				

	F. If amending or adding additional sheets, if nec	onal Articles, enter char essary). (Be specific)			
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	not applicable				
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not applicable		e N/A)			
	not applicable				· · · · · · · · · · · · · · · · · · ·
					
	·				

	March 17, 2016	
I'he date of each amendment		, if other than t
date this document was signed.		
Effective date if applicable:	not applicable	
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date whe Department of State's records.	vill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement and for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Marci Dated	h 23, 2018	
Signature	Donna & Smisson CED/PRESIDENT	
	by a director, president or other officer $\frac{1}{2}$ if directors or officers have not been	
	elected, by an incorporator – if in the hands of a receiver, trustee, or other court oppointed fiduciary by that fiduciary)	
-r	• •	
	Donna L. Simpson	
	(Typed or printed name of person signing)	
	CEO/President	
	(Title of person signing)	