## P13000021811

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: Stem Cell BER: P130000218	Markinting, IN	C
The enclosed Articles	of Amendment and fee are su	binitied for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Jason Matuszev	wski	
		Name of Contact Person	1
	BioStem Techno	ologies Inc.	
		Firm/ Company	
	4749 NE 11th A	VE	
		Address	
	Oakland Park, F	FL 33334	
		City/ State and Zip Code	9
ias	son@biostemtecl	h.com	
<u> ,                                   </u>		sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Jason Matu	ıszewski	<sub>at (</sub> 414	<u>339-4768</u>
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	urtment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div	iling Address endment Section ision of Corporations D. Box 6327	Amend Division	Address ment Section on of Corporations Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Stem Cell Marketing, Inc.			
(Name of Corporation as currently	v filed with the Florida Dept. o	of State)	_
P13000021811			
(Document Number	r of Corporation (if known)		_
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	rida Statutes, this <i>Florida Profu</i>	Corporation adopts the following	ng amendment(s) to
A. If amending name, enter the new name of the	e corporation:		
Regenerative Bioscience, In	IC.		The new
name must be distinguishable and contain the v "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or t	orp," "Inc," or "Co". A profe		
B. Enter new principal office address, if applica (Principal office address <u>MUST BE A STREET A</u>			- -
C. Enter new mailing address, if applicable:	***************************************		
(Mailing address MAY BE A POST OFFICE)	<u> </u>		-87 - A
D. If amending the registered agent and/or registered agent and/or the new register		ı, enter the name of the	99 B
Name of New Registered Agent			
	(Florida street address)	<del></del>	
New Registered Office Address:	(City)	, Florida(Zip Code)	_
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agent	Registered Agent: nt. I am familiar with and accep	ot the obligations of the position.	
Signature oj	f New Registered Agent, if chang	ging	

## 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 <math>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>oe</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change		<b></b>		
Add				
Remove				
3) Change				
Add				
4) Change	·	<del>_</del>		
Add				
Remove				
5) Change	· · ·	<del></del>	·	
Add				
Remove				
6) Change				
Add		<del>_</del>		
Remove				

E.	If amending or adding additional Articles, enter change(s) here:					
	(Attach additional sheets, if necessary).	(Be specific)				
_						
		<del></del>				
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		**************************************				
		<del></del>				
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F.	F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,					
	provisions for implementing the amen	ndment if not contained in the amendment itself:				
	(if not applicable, indicate N/A)					
_	· · · · · · · · · · · · · · · · · · ·					
_						
—	<del> </del>	<del></del>				

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The date of each amendment(s) adoption: 9-26-2014 date this document was signed.	, if other than the
Effective date if applicable: 9-29-2014	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 9-29-2014	
Signature Jason Matuszewski	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Jason Matuszewski	
(Typed or printed name of person signing)	
President	
(Title of person signing)	-