

## **COVER LETTER**

TO: Amendment 5 Division of C			
NAME OF COR	PORATION: Stem Cell Training	g, Inc.	
DOCUMENT NU	JMBER: P13000035214		
	cles of Amendment and fee are su	bmitted for filing.	
Please return all co	orrespondence concerning this ma	tter to the following:	
	Eric P. Gros-Dubois, Esq.		
		Name of Contact Person	1
	EPGD Attorneys at Law, P.J		
		Firm/ Company	
	2701 Ponce de Leon Blvd., S	Ste. 202	·
		Address	
	Coral Gables, FL 33134		
		City/ State and Zip Cod	e
e	ric@epgdlaw.com		
<u>-</u>		sed for future annual report	notification)
	•	•	•
For further inform	ation concerning this matter, plea	se call:	
Eric P. Gros-Dubois, Esq.		786	837-6787
Na	me of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a chec	k for the following amount made	payable to the Florida Depa	artment 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

2015-10-30 15:44:27 (GMT)

13057180687 From: Assistant Assistant

THEF.

Articles of Amendment to Articles of Incorporation 15 OCT 30 AM 10: 11

Stem Cell Training, Inc.		.,
(Name	of Corporation as curre	ntly filed with the Florida Dept. of State)
P13000035214		
	(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, th	is Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new n	ame of the corporation:	
N/A		The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	iation "Corp," "Inc," oi	tion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address,	if applicable:	N/A
(Principal office address MUST BE A S		
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		N/A
(	<u> </u>	
		•
<ul> <li>If amending the registered agent an new registered agent and/or the nev</li> </ul>	d/or registered office address	Idress in Florida, enter the name of the
,	EPGD Attorneys at Law	
Name of New Registered Agent		
	2701 Ponce de Leon Blu	vd., Ste. 202
	(Florida	street address)
New Registered Office Address:	Coral Gables	, Florida 33134
		(City) (Zip Code)
New Registered Agent's Signature, if c		
i nerevy accept the appointment as regist	erea agens. I am familia	r with and accept the obligations of the position.
<u> </u>	's M	
9/	バメへ	
	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; 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.

X Change	PT	John Do	<u>•</u> .	
X Remove	¥	Mike Jor	nes	
X Add	<u>sv</u>	Sally Sm	<u>ith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change		_		
Add				
Remove				
2)Change		±+++		 
Add				
Remove				
3 ) Change		_		 
Add				
Remove				
4) Change		_		
Add				
Remove				
5)Change		_		 ****
Add				
Remove				•
6) Change		_		<u>-</u>
Add				
Remove				

	sch additional sheets, if necessary). (Be specific)
l/A	
-	
If a	n amendment provides for an exchange, reclassification, or cancellation of issued shares, ovisions for implementing the amendment if not contained in the amendment itself:
pri	(if not applicable, indicate N/A)
/A	
···	

The date of each amendment(s)	adoption:	if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date will be partment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	it for the amendment(s) was/were sufficient for approval	
by	<u>.</u> ,"	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were as action was not required.	dopted by the incorporators without shareholder action and shareholder	
October 2 Dated	29, 2015	
Signature	ENT	
selec	director, president or other officer – if directors or officers have not been red, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	Eric P. Gros-Dubois, Esq.	
	(Typed or printed name of person signing)	<del></del>
	Authorized Representative	
	(Title of person signing)	<del></del>