## P13000096614

| (F                   | Requestor's Name)        |        |
|----------------------|--------------------------|--------|
| (/                   | Address)                 |        |
| (/                   | Address)                 |        |
|                      | City/State/Zip/Phone #)  |        |
| ()                   | Jity/State/Zip/Prione #, |        |
| PICK-UP              | ☐ WAIT                   | MAIL   |
| (1                   | Business Entity Name)    | 1      |
|                      |                          |        |
| (1                   | Document Number)         |        |
| Certified Copies     | Certificates of          | Status |
| Special Instructions | to Filing Officer:       |        |
|                      |                          | :      |
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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

| Division of Corpora        | itions                                      |  |   |
|----------------------------|---|--|---|
| NAME OF CORPORA            | TION: SOULMEDIC                             | CAL INTERNATION  | ONAL CORP   |
| DOCUMENT NUMBE             | <sub>R:</sub> P130000960                    | 614  |   |
| The enclosed Articles of   | Amendment and fee are su                    | bmitted for filing.  |   |
| Please return all correspo | ondence concerning this ma                  | tter to the following:   |   |
| Z                          | ULMA RIVER                                  | ROS  |   |
|                            |   | Name of Contact Person   | n   |
| <u>F</u>                   | RIVEROS COI                                 | RP .   |   |
|                            |   | Firm/ Company  |   |
| 1                          | 401 SAWGRA                                  | ASS CORPO  | RATE PKWY   |
| <del></del>                |   | Address  | **************************************                                    |
| 5                          | SUNRISE, FL                                 | 33323  |   |
|                            | ,     | City/ State and Zip Cod  | e   |
| CEC                        | @RIVEROS                                    | CORP.COM   |   |
|                            | E-mail address: (to be us                   | sed for future annual report                                       | notification)   |
| For further information o  | concerning this matter, pleas               | e call:  |   |
| ZULMA RIV                  | EROS  | at (305  | , 5078464   |
| 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  | artment of State:   |
| \$35 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 |

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

is enclosed)

## Articles of Amendment to Articles of Incorporation

## SOULMEDICAL INTERNATIONAL CORP

| (Name of Corporation as currently   | filed with the Florida Dept. o   | f State)   |                     |
|---|----------------------------------|--|---------------------|
| P13000096614  |                                  |  |                     |
| (Document Number  | of Corporation (if known)        |  |                     |
| Pursuant to the provisions of section 607,1006, Florits Articles of Incorporation:  | da Statutes, this Florida Profit | Corporation adopts the following   | g amendment(s) to   |
| A. If amending name, enter the new name of the  | corporation;                     |  |                     |
|   |                                  |  | The new             |
| name must be distinguishable and contain the w<br>"Corp.," "Inc.," or Co.," or the designation "Co.<br>word "chartered," "professional association," or the | p," "Inc," or "Co". A profe.     |  |                     |
| B. Enter new principal office address, if applical (Principal office address MUST BE A STREET A)  |                                  |  |                     |
|   | <del></del>                      | ·  |                     |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E  | (OX)                             |  |                     |
| D. If amending the registered agent and/or registered agent and/or the new registered   |                                  | , enter the name of the  |                     |
| Name of New Registered Agent  |                                  | alle de la constant d |                     |
|   | (Florida street address)         |  |                     |
| New Registered Office Address:  |                                  | , Florida  |                     |
|   | (City)                           | (Zip Code)   | SEC<br>PVISH<br>14F |
| New Registered Agent's Signature, if changing R   |                                  | ada di salam afala a salam   | SKLTARY OF ST       |
| I hereby accept the appointment as registered agent   | i am jamiliar with and accep     | ine obligations of the position.   | ₹ 598<br>198        |
| Signature of  | New Registered Agent, if chang   | ing  |                     |

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 Doe       |                   |  |  |  |
|----------------------------|-----------|----------------|-------------------|--|--|--|
| X Remove                   | <u>v</u>  | Mike Jones     |                   |  |  |  |
| X Add                      | <u>sv</u> | Sally Smith    |                   |  |  |  |
| Type of Action (Check One) | Title     | Name           | <u>Addres</u> s   |  |  |  |
| 1) Change                  | SEC       | ZULMA RIVEROS  | 1401 SAWGRASS     |  |  |  |
| Add                        |           |                | CORPORATE PKWY    |  |  |  |
| Remove                     |           |                | SUNRISE, FL 33323 |  |  |  |
| 2) Change                  | SEC       | CARLOS E PEREZ | 1401 SAWGRASS     |  |  |  |
| Add                        |           |                | CORPORATE PKWY    |  |  |  |
| Remove                     |           |                | SUNRISE, FL 33323 |  |  |  |
| 3) Change                  |           |                | <u> </u>          |  |  |  |
| Add                        |           |                |                   |  |  |  |
| Remove                     |           |                |                   |  |  |  |
| 4) Change                  |           |                |                   |  |  |  |
| Add                        |           |                |                   |  |  |  |
| Remove                     |           |                |                   |  |  |  |
| 5) Change                  |           | ···            |                   |  |  |  |
| Add                        |           |                |                   |  |  |  |
| Remove                     |           |                |                   |  |  |  |
| 6) Change                  |           |                |                   |  |  |  |
| Add                        |           |                |                   |  |  |  |
| Remove                     |           |                |                   |  |  |  |

| <b>f amending or add</b><br>Attach <i>additional sh</i> | eets, if necessary).                    | (Be specific)                          | <u>(C(8) Here</u> ;                              |  |  |
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|   | ·                                       |  |  |  |  |
|   |   |  |  |  |  |
| If an amendment p                                       | rovides for an excl                     | hange, reclassific                     | ation, or cancella                               | tion of issued shar                    | es.                                    |
| provisions for imp<br>(if not applicab                  | lementing the ame<br>ole, indicate N/A) | indment if not co                      | ntained in the am                                | endment itself:                        |  |
|   |   |  |  |  | ····                                   |
|   |   |  |  |  |  |
| <del> </del>  | <del></del>                             |  |  |  |  |
| <u>, , , , , , , , , , , , , , , , , , , </u>           | ···                                     |  |  |  |  |
|   |   |  |  | ······································ |  |
|   |   |  |  |  |  |
|   |   |  |  |  | ···· · · · · · · · · · · · · · · · · · |

| The date of each amendment(s) ad                              | loption:   | , if other than the |
|---|--|---------------------|
| date this document was signed.                                |  |                     |
| Effective date if applicable:                                 |  |                     |
|   | (no more than 90 days after amendment file date)   |                     |
| Adoption of Amendment(s)                                      | (CHECK ONE)  |                     |
| The amendment(s) was/were ado by the shareholders was/were su | pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.   |                     |
|   | roved by the shareholders through voting groups. The following statement 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)   |                     |
| The amendment(s) was/were ado action was not required.        | pted by the board of directors without shareholder action and shareholder  |                     |
| The amendment(s) was/were ado action was not required.        | pted by the incorporators without shareholder action and shareholder   |                     |
| Dated_JANUAF  | Philadeline  |                     |
| selected  | irector, president or other officer — if directors or officers have not been d, by an incorporator — if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary) |                     |
|   | CARLOS E PEREZ   |                     |
|   | (Typed or printed name of person signing)  | <del></del>         |
|   | PRESIDENT  |                     |
|   | (Title of person signing)  |                     |