# P14000003501

(Re	questor's Name)	
(Ad	dress)	· · · · · · · · · · · · · · · · · · ·
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





700259103017

04/18/14--01018--015 \*\*35.00

TA NEW 18 PM 28 39

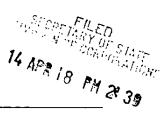
And 104.28.14

### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: TESTABL	
DOCUMENT NUMBER: P 14000035	JO 1
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this r	matter to the following:
JAVIER GUADA	ALUPE OLIVOS
	Name of Contact Person
TESTABLOOD	DIAGNOSTICS INC
	Firm/ Company
1080 99 STREE	ET SUITE 321
	Address
BAY HARBOR	ISLANDS, FL 33154
	City/ State and Zip Code
rickgaray@rgtax.co	om
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, plo	ease call:
RICKY D. GARAY	<sub>at (</sub> 786) 525-7085
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount mad	le payable to the Florida Department of State:
■ \$35 Filing Fee & Certificate of Status	
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

#### Articles of Amendment to Articles of Incorporation of



## **TESTABLOOD DIAGNOSTICS INC**

TEGTABLOOD DIAGNOOTIOC	7 11 10		~' <i>Jg</i>
(Name of Corporation as currently	filed with the Florida Der	ot. of State)	_
P14000003501			
(Document Number of	of Corporation (if known)		_
Pursuant to the provisions of section 607.1006, Flori its Articles of Incorporation:	da Statutes, this <i>Florida Pr</i>	ofit Corporation adopts the following	ig amendment(s) to
A. If amending name, enter the new name of the	corporation:		
			The new
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Cor word "chartered," "professional association," or th	rp," "Inc," or "Co". A pi		
B. Enter new principal office address, if applicab			_
(Principal office address <u>MUST BE A STREET AD</u>	ODRESS )		
		· · · · · · · · · · · · · · · · · · ·	-
			_
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE B	<u>ox</u> )		<u>_</u>
	<del></del>		_
			_
D. If amending the registered agent and/or regist	ered office address in Flor	ida, enter the name of the	
new registered agent and/or the new registered	d office address:	<del></del>	
Name of New Registered Agent			
		<del></del>	
	(Florida street address)	<del></del>	
Now Projectional Office Address		771 ' 1	
New Registered Office Address:	(City)	, Florida (Zip Code)	<del></del>
	•	. , ,	
New Registered Agent's Signature, if changing Re	egistered Agent:		
I hereby accept the appointment as registered agent.	I am familiar with and ac	cept the obligations of the position.	
		· · · · · · · · · · · · · · · · · · ·	
Signature of I	New Registered Agent, if ch	anging	

# 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: XChange	<u>PT</u>	John D	<u>loe</u>	
X Remove	<u>v</u>	Mike J	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	MGI	R	Javier Guadalupe Olivos	1080 99 STREET STE 32
Add				BAY HARBOR ISLANDS
Remove				FL 33154
2) Change		_		·
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

tach additional sheets, if necessary).	(Be specific)			
		· <u> </u>		
·	1.0.0			
	<del></del>	<del></del> -		
				<del></del>
<del></del>		<del>-</del>		
an amendment provides for an exch	ange, reclassific	ation, or cance	ellation of issue	d shares,
rovisions for implementing the amer (if not applicable, indicate N/A)	ndment if not co	ntained in the	amendment its	elf:
(g voi approducte, material (g/1)				
	<del></del>			
	· · · · · · · · · · · · · · · · · · ·	·	<del></del> -	
<del></del>				

The date of each amendment(s)	adoption: 04/14/2014	, if other than the
date this document was signed.		
Effective date if applicable:	4/14/2014 (no more than 90 days after amendment file date)	<del></del>
·	(no more than 90 days after umenament file date)	•
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by	n .	
	(voting group)	
action was not required.	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder	
Dated 04/14	/2014	
Signature	Jundston	
(By	a director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	<del></del>
	JAVIER GUADALUPE OLIVOS	•
	(Typed or printed name of person signing) -	•
•	MANAGER	
•	(Title of person signing)	<del></del>