

| (Requestor's Name)                      |
|---|
|   |
| (Address)                               |
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| (Address)                               |
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| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
|   |
| (Document Number)                       |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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| <u>COVER LETTER</u>  |  |  |  |  |
|--|--|--|--|--|
| TO: Amendment Section Division of Corporations   |  |  |  |  |
| NAME OF CORPORATION: BIONEET INC   |  |  |  |  |
| DOCUMENT NUMBER: \$14000000 4586   |  |  |  |  |
| The enclosed Articles of Amendment and fee are submitted for filing.   |  |  |  |  |
| Please return all correspondence concerning this matter to the following:  |  |  |  |  |
| Pedro Garcia   |  |  |  |  |
| Name of Contact Person   |  |  |  |  |
| Dioneer, Inc   |  |  |  |  |
| Firm/ Company  |  |  |  |  |
| 8229 N.W 1995t   |  |  |  |  |
| Hinlenh Fl 33015   |  |  |  |  |
| City/ State and Zip Code   |  |  |  |  |
| E-mail address: (to be used for future annual report notification)   |  |  |  |  |
| For further information concerning this matter, please call:   |  |  |  |  |
| Pedro Collice at (305) Sog 1601  Name of Contact Person Area Code & Daytime Telephone Number   |  |  |  |  |
| Enclosed is a check for the following amount made payable to the Florida Department of State:  |  |  |  |  |
| S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed)  S35 Filing Fee & Certified Copy (Additional Copy is enclosed)  S43.75 Filing Fee & Certified Copy (Additional Copy is enclosed) |  |  |  |  |
| Mailing Address Street Address   |  |  |  |  |
| Amendment Section Amendment Section  Division of Corporations Division of Corporations   |  |  |  |  |
| P.O. Box 6327 Clifton Building   |  |  |  |  |
| Tallahassee, FL 32314 2661 Executive Center Circle   |  |  |  |  |

Tallahassee, FL 32301

## Articles of Amendment

to

FILED

|  | Articles of Incorporation of                      | 17 AUG 18 AM 10: 45                         |
|--|---|---|
| 3  | innopr. Inc                                       |   |
| (Name of Corp.   | oration as currently filed with the Flori         | da Dept. of State)                          |
| \(\frac{1}{2}\)  | 140000004586                                      | ,   |
| (D   | ocument Number of Corporation (if know            | m)  |
| Pursuant to the provisions of section 607.1006, F its Articles of Incorporation:   | lorida Statutes, this <i>Florida Profit Corpo</i> | ration adopts the following amendment(s) to |
| A. If amending name, enter the new name of t   | he corporation:                                   |   |
|  |   | The new                                     |
| name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "word "chartered," "professional association," o | Corp," "Inc," or "Co". A professional             |   |
| B. Enter new principal office address, if applie (Principal office address MUST BE A STREET  | cable:<br>ADDRESS )                               |   |
|  |   |   |
|  | - <del></del>                                     |   |
| C. Enter new mailing address, if applicable:   |   |   |
| (Mailing address <u>MAY BE A POST OFFIC</u>  | <u> </u>  |   |
|  |   |   |
|  | <del></del>                                       |   |
| D. If amending the registered agent and/or re-<br>new registered agent and/or the new regist   |   | the name of the                             |
| Name of New Registered Agent   |   |   |
|  |   |   |
|  | (Florida street address)                          |   |
| New Registered Office Address:   |   | , Florida                                   |
|  | (City)  | (Zip Code)                                  |
|  |   |   |
| New Registered Agent's Signature, if changing  | . Pagistored Agent:                               |   |
| I hereby accept the appointment as registered ag   |   | oligations of the position.                 |
|  |   |   |
|  |   |   |
|  | Signature of 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: 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) | <u>Title</u> | Name            | Address           |
| 1) Change                  | 16           | Omar Betancoart | 660 S.W S7 Avenue |
| Add                        |              |                 | Apt 10            |
| Remove                     |              |                 | Miami FL 33144    |
| 2) Change                  |              |                 |                   |
| Add                        |              |                 |                   |
| Remove                     |              |                 |                   |
| 3 ) Change                 |              |                 |                   |
| Add                        |              |                 |                   |
| Remove                     |              |                 |                   |
| 4) Change                  |              |                 |                   |
| Add                        |              |                 |                   |
| Remove                     |              |                 |                   |
| 5) Change                  |              |                 |                   |
| Add                        |              |                 |                   |
| Remove                     |              |                 |                   |
| 6) Change                  |              |                 |                   |
| Add                        |              |                 |                   |
| Remove                     |              |                 |                   |

| Attach additional sheets, if necessary). | (Be specific)   |
|--|---|
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| provisions for implementing the ame      | hange, reclassification, or cancellation of issued shares.<br>endment if not contained in the amendment itself: |
| (if not applicable, indicate N/A)        |   |
|  |   |
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| The date of each amendment(s) adoption: 8/14/2017  | , if other than the       |
|--|---------------------------|
| date this document was signed.   |                           |
| Effective date if applicable: (no more than 90 days after amendment file date)   | <del></del>               |
| (no more than 50 days after amenament file date)   |                           |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date locument's effective date on the Department of State's records.                             | will not be listed as the |
| Adoption of Amendment(s) (CHECK ONE)   |                           |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of votes east 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 8/14/2017  |                           |
| Signature  |                           |
| (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  |                           |
| appointod fiduciary by that fiduciary)   |                           |
| Pedro Carucu   |                           |
| (Typed or printed name of person signing)  |                           |
| President  |                           |
| (Title of person signing)  | · —                       |