P14DD0057175

| (Re | equestor's Name) | |
|-------------------------|--------------------|-----------|
| (Ac | ldress) | |
| (Ac | ldress) | |
| (Ci | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | isiness Entity Nan | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | - |
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SECRETARY OF STATE OF CORPORATIONS OF CORPORATIONS OF STATE OF STA

Amend (1)20,15

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: RC PHARMA INC | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|
| DOCUMENT NUMBER: P 140000 57-175 | | | | | |
| The enclosed Articles of Amendment and fee are submitted for filing. | | | | | |
| lease return all correspondence concerning this matter to the following: | | | | | |
| Tesus M I gless As Frame of Contact Person Re PAARMA i NC | | | | | |
| Firm/Company 2772 SW 13744 Ave Address | | | | | |
| Mi Ami PL 33175 City/ State and Zip Code | | | | | |
| E-mail address: (to be used for future annual report notification) | | | | | |
| or further information concerning this matter, please call: | | | | | |
| Tesus M Isles at (786) 399-9348 Name of Contact Poson Area Code & Daytime Telephone Number | | | | | |
| inclosed is a check for the following amount made payable to the Florida Department of State: | | | | | |
| \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed) | | | | | |
| Mailing Address Street Address | | | | | |

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



| | rma, INC | | _ _ |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|---------------------------------------------------------------------|-----------------------------|
| (Name of Corporation as currently filed | with the Florida Dept. | of State) | |
| P1400 | 10057175 | | |
| (Document Number of Co | rporation (if known) | | _ |
| Pursuant to the provisions of section 607.1006, Florida St its Articles of Incorporation: | atutes, this Florida Prof | it Corporation adopts the following | ng amendment(s) to |
| A. If amending name, enter the new name of the corpo | oration: | | |
| N | lA | | The new |
| name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the abb | "Inc," or "Co". A pro | ny," or "incorporated" or the of fessional corporation name must | abbreviation contain the |
| B. Enter new principal office address, if applicable: | | NA | |
| (Principal office address <u>MUST BE A STREET ADDRE</u> | <u>ESS</u>) | , | |
| | | | |
| | | | _ |
| C. Enter new mailing address, if applicable: | | 1.1 0 | |
| (Mailing address <u>MAY BE A POST OFFICE BOX</u>) | | _ N Pt | _ |
| | | | _ |
| | | | |
| 5 To 10 10 10 10 10 10 10 10 10 10 10 10 10 | | | |
| D. If amending the registered agent and/or registered new registered agent and/or the new registered offi | | ia, enter the name of the | |
| | NIA | | |
| Name of New Registered Agent | 1 (17 | | |
| | (11) | | |
| | (Florida street address) | | |
| New Registered Office Address: | (City) | , Florida(Zip Code) | - |
| | (City) | (Zip Code) | |
| | | | |
| New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I am | | ept the obligations of the position. | |
| | | | |
| Signature of New 1 | Registered Agent, if chan | nging | |

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 Do | <u>e</u> | | | | |
|----------------------------|-----------|----------|-------------|-------|-----------|-------------------|-----|
| X Remove | <u>v</u> | Mike Jos | nes | | | | |
| X Add | <u>sv</u> | Sally Sm | | | | | |
| Type of Action (Check One) | Title | | <u>Name</u> | | | Address | |
| 1) Change | P | _ | JESUS | M J6 | lesias | 2772 SW 137th AVE | |
| Add | · | | | | | MIAMI FL 33175 | |
| Remove | | | | | | | |
| 2) Change | <u> P</u> | _ | Joel | River | a Pleitas | 2772 SW 137 14 | Ave |
| Add Add | | | | | | MIAMI PL 33175 | |
| Remove | | | | | | | |
| 3) Change | | _ | | | | | |
| Add | | | | | | | |
| Remove | | | | | | | |
| 4) Change | | | | | | | |
| Add | | | | | | | |
| Remove | | | | | | | |
| 5) Change | | _ | | | | | |
| Add | | | | | | | |
| Remove | | | | | | | |
| 6) Change | | _ | | | | | |
| Add | | | | | | | |
| Remove | | | | | | | |

| If amending or adding additional Articles, enter change(s) here: | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|
| Attach additional sheets, if necessary). (Be specific) | |
| AMBNDING Articles IV | |
| Belete President Jesus M Islesias- 2772 | 5w 137 Are |
| AMBNDING Articles TV Belete President Jesus M Iglesias-2772 ADD New President Joel Rivera Pleitas-2 | 2772 SW 1371 |
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| If an amendment provides for an exchange, reclassification, or cancellation of issued shares provisions for implementing the amendment if not contained in the amendment itself: | 1 |
| (if not applicable, indicate N/A) | |
| | |
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| The date of each amendment(s) ado | ption; | , ii otner than ti |
|---------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|--------------------|
| 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 adop by the shareholders was/were suff | ted by the shareholders. The number of votes cast for the amendment(s) icient for approval. | |
| | oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s): | |
| "The number of votes cast fo | or the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | (voting group) | |
| The amendment(s) was/were adop action was not required. | ted by the board of directors without shareholder action and shareholder | |
| The amendment(s) was/were adop action was not required. | ted by the incorporators without shareholder action and shareholder | |
| Dated | 1/20/5 | |
| Signature Y | | |
| (By a dy | etor, president or other officer - if directors or officers have not been | |
| | by an incorporator – if in the hands of a receiver, trustee, or other court | |
| appointe | d fiduciary by that fiduciary) Tesus H Ig lesia. | <u>u</u> |
| _ | (Typed or printed name of person signing) | |
| | Hesider | _ |
| _ | (Title of person signing) | |