P14000062354

(Re	equestor's Name))
(Ad	ldress)	
(Ad	idress)	
(Ci	ty/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Na	me)
(Do	ocument Number)
Certified Copies	_ Certificate	es of Status
Special Instructions to	Filing Officer:	
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SECIRE TARY OF STATE
DIVISION OF CORPORATIONS

1.1.15

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

	1	040000	D =r-	1004
NAME OF CORPORATION: _	LEMAN	PHARPIA	KESE	4KC 17
DOCUMENT NUMBER:	P140000	62354	 	
The enclosed Articles of Amendm	ent and fee are sub	mitted for filing.		
Please return all correspondence co	oncerning this matt	er to the following	;:	
	Alejandr	o I. Of	porta	
	LEMAN	PHARM & Firm/ Comp	RES	EARCH
		Firm/ Comp	any	
v	777/ NI	W $7Sf$	APT	715
<u> </u>				
	Miam	City/ State and Z	33/2	6
		City/ State and Z	Lip Code	
	alejo644	10 yaho	o. Cor	n . fication)
E-maii	address (to be use	d for futbre annua	report nou	neation)
The contract of the second	41.1 h	22		
For further information concerning	this matter, piease	Can;		
Alejandro C	borta	at (<u>3</u>	05	9/5-695/ Daytime Telephone Number
Name of Contact P	rson	/	arca Code &	Daytime Telephone Number
Enclosed is a check for the followi	ng amount made pa	ayable to the Florid	la Departmo	ent of State:
/	75 Filing Fee & ficate of Status	S43.75 Filing F Certified Copy (Additional cop enclosed)	y is	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Addres Amendment Sect Division of Corp P.O. Box 6327	ion		Street Add Amendmen Division of Clifton Buil	t Section Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

Leman Pharma Research In (Name of Corporation as currently filed with the Florida Dept. of State)	<u>c</u> .
P1400062354	
(Document Number of Corporation (if known)	-
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following its Articles of Incorporation:	g amendment(s) to
A. If amending name, enter the new name of the corporation:	
	TI
name must be distinguishable and contain the word "corporation," "company," br "incorporated" or the a "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must word "chartered," "professional association," or the abbreviation "P.A."	_Ine new bbreviation contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	-
C. Enter new mailing address, if applicable: (Muiling address MAY BE A POST OFFICE BOX)	SECHETARY OF COR
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	U OF SIATE RPORATIO
Name of New Registered Agent	9 X 5
(Florida street address)	
New Registered Office Address: , Florida,	
(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: 1 hereby accept the appointment as registered agent. 1 am familiar with and accept the obligations of the position.	
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.

Example:	ore, and ba	ny oman, br as an maa.	
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>	<u>Name</u>	Address
1) Change		Alejandro I Oporta	1777 NW 7 St
Add Remove		Alejandro I Oporta (Fother is the Some name of the Son).	7771 NW 7 St APT 715 Miami, FL 3312
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attacl	additional sheets, if necessary). (Be specific)	
_		
provi	mendment provides for an exchange, reclassification, or cancellation of issued shares, sions for implementing the amendment if not contained in the amendment itself: I not applicable, indicate N/A)	
	ı	
		_

	FILED SECRETARY OF STATE SECRETARY OF STATE	
The date of each amendment(s) adoption: date this document was signed.	DIVISION OF CORPORATIONS	_, if other than the
Effective date if applicable:	14 DEC 24 AM 8: 69 (no more than 90 days after amendment file date)	
	(no more man 50 mays after untenument the unie)	
Adoption of Amendment(s) (C	HECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of votes cast for the amendment(s) approval.	
	he shareholders through voting groups. The following statement g group entitled to vote separately on the amendment(s):	
"The number of votes cast for the ame	endment(s) was/were sufficient for approval	
by	oting group)	
(ve	oting group)	
The amendment(s) was/were adopted by the action was not required.	e board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted by the action was not required.	e incorporators without shareholder action and shareholder	
Dated/2 / 2 2	12014	
Signature	11	
(By a director, pre	sident or other officer – if directors or officers have not been	
	corporator – if in the hands of a receiver, trustee, or other court by by that fiduciary)	
appointed fiducial		. 1
	Alajandro I Oporta (S (Typedor printed name of person signing)	on)
	(Typed/or printed name of person s/gning)	
	Prosident.	
- 	(Title of person signing)	_