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| (Re | equestor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | <u></u> |
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SECRETARY OF STATE

Amund 03/13/15

COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: LAWOSTIC DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: 21T2000 E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 77) 409 - 3200 Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee ☐\$43.75 Filing Fee & □\$52.50 Filing Fee □\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

| of | | |
|---|-------------------------------|---------------------------------|
| DIAMPOSTIC IN | 1 2001ALION | NIC 1 |
| (Name of Corporation as currently filed with the Flo | | |
| P 150000 1999 1 | | |
| (Document Number of Corporation (if) | (nown) | |
| tursuant to the provisions of section $607,1006$. Florida Statutes, this Fi is Articles of Incorporation: | lorida Profit Corporation ado | opts the following amendment(s) |
| A. If amending name, enter the new name of the corporation: | | |
| | | The new |
| iame must be distinguishable and contain the word "corporation," "Carp.," "Inc.," or Co.," or the designation "Corp" "Inc." or "Co cord "chartered" - professional association," or the abbreviation "P | o' A professional corporati | ated" or the abbreviation |
| B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u> (| | SIR SISIAIO |
| | | ALS HAY -6 |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | |
| | | PH 2: 52 |
| | | 55 |
| If amending the registered agent and/or registered office addres | s in Florida enter the name | of the |
| new registered agent and/or the new registered office address: | S It I TO ING. CITE THE BATH | of the |
| Name of New Registered Agent 18 FF LAY | GROW | |
| 1717 E H | AMPSHIRE STR | EET |
| New Registered Office Address. T Nove 80656 | , Florida_ | 34453 (Zip Code) |
| | | |
| | | |

New Registered Agent's Signature, if changing Registered Agent:

Thereby accept the appointment as registered agent. Tum familiar with and accept the obligations of the position.

ed Agent 17 hanging

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 | PT John D | oe | |
|-------------------------------|--------------|-----------------|---------------------|
| X Remove | V Mike J | | |
| X Add | SV Sally S | | |
| | | | |
| Type of Action (Check One) | <u>Title</u> | Name | <u>Addres</u> s |
| 1) Change | VP | RADOR ZARUKOUEL | |
| Add Remove | | | |
| Remove | | | |
| 2) Change | <u>P</u> | MOUTT GROW | |
| Add | | | |
| Remove | _ | | |
| 3) Change | <u>P</u> _ | JEFFELY GROW | 2227 E HAMPSHIER ST |
| Add | | | THURRUISS, FL 34453 |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| <u>' 8</u> | i mer | idins addi | or ac tional | iding Sheet | ade | <u>litior</u> nece | nal A | Artic | cles, (Be | ente sper | <mark>r ch</mark> cific | ange ! | (s) h | еге: | | | | | | | |
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|)[] | ovi: | ions | for in | npler | nent | ting t | the a | mei | ndme | nt i | no | con | tain | ed in | the a | mendn | nent | itself | | 23. | |
| | (i, | f not | applic | able. | ind | icate | N/A | 1) | | | | | | | | | | , | | | |
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| The date of each amendment(s) addete this document was signed. | , if other than th | | | | | | | |
|--|---|--------------|--|--|--|--|--|--|
| Effective date <u>if applicable</u> : | Tective 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 suf | oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval. | | | | | | | |
| The amendment(s) was/were appromist be separately provided for a | roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s): | | | | | | | |
| | for the amendment(s) was/were sufficient for approval | | | | | | | |
| by | (voting group) | | | | | | | |
| | (voting group) | | | | | | | |
| The amendment(s) was/were adopt action was not required. | oted by the board of directors without shareholder action and shareholder | | | | | | | |
| The amendment(s) was/were adopaction was not required. | pted by the incorporators without shareholder action and shareholder | | | | | | | |
| Dated App | 9, 2015 | | | | | | | |
| Signature | 5-16-7- | | | | | | | |
| (By 2701) | rector/president or owner officer — if directors or officers have not been | | | | | | | |
| | , by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary) | | | | | | | |
| | FROM LABUKOVEC | | | | | | | |
| | (Typed or printed name of person signing) | | | | | | | |
| | (Title of person signing) | _ | | | | | | |
| | (Title of person signing) | - | | | | | | |