P1500044952

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JUL 0 9 2014

C. CARROTHERS

SECRETARY DE STATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Broadstaff Incorpo	rated	
DOCUMENT NUMB	D1500040052		
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	oondence concerning this ma	tter to the following:	
1	Russell Liebowitz		
-		Name of Contact Person	n
1	Broadstaff Inc		
-	·	Firm/ Company	
;	3802 Henderston Blvd Suite	208	
-		Address	
•	Γanpa/Florida 33629		
•		City/ State and Zip Cod	e
niss lie	ebowitz@broadstaff.net		
	_	sed for future annual report	notification)
			,
For further information	concerning this matter, pleas	se call:	
Sheri Smith		at (901-4910
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ing Address ndment Section ion of Corporations Box 6327 hassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

Bioausian, inc.				
	of Corporation as currently	filed with the Florida Dept.	of State)	
P15000049952				
	(Document Number of	Corporation (if known)		دے
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this I	Florida Profit Corporation add	opts the following amendme	
A. If amending name, enter the new na	ame of the corporation:		The new	-2
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "C	Co". A professional corporal	rated" or the abbreviation	,
B. Enter new principal office address, if applicable:		3802 Henderson Blvd	`\$u*	
(Principal office address MUST BE A S		Suite 208		
		Tampa, Florida 33629		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		3802 Henderson Blvd		
		Suite 208		
		Tampa, Florida 33629		
D. If amending the registered agent an new registered agent and/or the ne			e of the	
Name of New Registered Agent	Russell Liebowitz			
	3802 Henderson Blvd, Suit	e 208		
	(Florida stre	et address)		
New Registered Office Address:	Tampa		Florida 33629	
	t	(City)	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as registered.			of the position.	
	Signature of New Ri	egistered 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.

X Change	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	P	Susan D Liebowitz	9846 West Park Village Drive
Add			Tampa, Florida 33626
X Remove			
2) Change	VP	Russell Liebowitz	9846 West Park Village Drive
Add			Tampa, Florida 33626
X Remove			
3) Change	P	Russell Liebowitz	9846 West Park Village Drive
XAdd			Tampa, Florida 33626
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)		
	1.00	
		
If an amendment provides for an ar	vahanga vaslassification ar equalitation of issued shares	
provisions for implementing the as	xchange, reclassification, or cancellation of issued shares, mendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	1	

The date of each amendment(s) adoption:	, if other than the
Effective date <u>if applicable</u> :	
(no more than 90 days after a	nmendment file date)
Note: If the date inserted in this block does not meet the applicable statutory document's effective date on the Department of State's records.	y filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of very by the shareholders was/were sufficient for approval.	otes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting g must be separately provided for each voting group entitled to vote separate	
"The number of votes cast for the amendment(s) was/were sufficient for	or approval
by	
(voting group)	
■ The amendment(s) was/were adopted by the board of directors without share action was not required.	eholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without sharehold action was not required.	der action and shareholder
DatedSignature	
(By a director, president or other officer – if direct selected, by an incorporator – if in the hands of a rappointed fiduciary by that fiduciary)	
Russell Liebowitz	
(Typed or printed name of person	on signing)
President	
(Title of person sign	ning)