P15000050100

(Requestor's Name)
(Address)
(Address)
. (City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900370293539

07/29/21--01014--010 ***35.00

FILED
2021 JUL 29 AH 9: 37
SECALIAN SEFFITIE

5 Kn -

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: MedScience Resea	rch Group, Inc.		
	1BER: P15000050100			
The enclosed Article	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	Marvin Smollar			
		Name of Contact Persor	1	
		Firm/ Company		
	901 Northpoint Parkway Suit	e 302		
	Address			
	West Palm Beach FL 33407			
	· <u> </u>	City/ State and Zip Code	2	
	marvsmollar@gmail.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informati	on concerning this matter, pleas	se call:		
Marvin Smollar		at (4990411	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check	for the following amount made	payable to the Florida Depa	ortment of State:	
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is	□\$52.50 Filing Fee Certificate of Status Certified Copy	
Chech # !	5277 BALLOSA	enclosed)	(Additional Copy is enclosed)	
	ailing Address nendment Section		Address Iment Section	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

to

MedScience Research Group, Inc.			
(Name of Corporation as	currently filed with the Flor	rida Dept. of State)	
P15000050100			
(Document N	Sumber of Corporation (if kno	own)	
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	ates, this Florida Profit Corpo	oration adopts the following	ng amendment(s
A. If amending name, enter the new name of the corpora	ation:		
			The new
name must be distinguishable and contain the word "corpora" Inc., " or Co.," or the designation "Corp," "Inc." or "chartered," "professional association," or the abbreviatio	"Co". A professional corpo	porated" or the abbreviati oration name must conta	on "Corp.," in the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	<u>S</u>)		
		(2)	
		ان ان ا	_ <u></u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
(maining datatess MAT DE ATOST OFFICE BOX)	-	<u> </u>	- 2 9-
		<u> </u>	
		tus. Literatus	ت
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		r the name of the	37
Name of New Registered Agent	<u>-</u>		 -
	Horida street address)		_
New Registered Office Address:		, Florida	
	(City)	(Zip	Code)
New Registered Agent's Signature, if changing Registere	ed Agent:		
I hereby accept the appointment as registered agent. I am f	familiar with and accept the o	bligations of the position.	
Signature o	of New Registered Agent, if ch	hanging	_

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 Doe	
X Remove			
X Kemove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	PD	Troy Grogan	16469 Bridlewood Cir
Add			Delray Beach FL 33445
X Remove			
2) Change			
Add			
Remove 3) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			<u> </u>
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
	•
	<u> </u>
·	
	
-	
an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	<u> </u>
	

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Ţ.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirement Department of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareho	older action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amosufficient for approval.	endment(s)
	pproved by the shareholders through voting groups. The followin or each voting group entitled to vote separately on the amendmen	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	.,,	
	(voting group)	
07/12/20 Dated Signature	Machine an	
(By a	director, president or other officer – if directors or officers have ted, by an incorporator – if in the bands of a receiver, trustee, or of inted fiduciary by that fiduciary)	
	Marvin Smollar	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	