## P15600054429

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	siness Entity Na	ne)
(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
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OCT 9 2014 C. CARROTHERS

## \* COVER LETTER

TO: Amendment Section

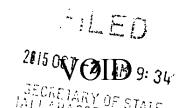
Division of Corporations
NAME OF CORPORATION: SUPERPhayma  DOCUMENT NUMBER: P 1500054629
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
rease return an correspondence concerning this matter to the following.
Onahira Ravas Dioses Name of Contact Person
Director - Super Pharma
Firm/ Company
6349 Castelven Dr# 101
Orlando Florida 32835
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Onahira Rivas 321, 3183809
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)  Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment Section

**Division of Corporations** 

P.O. Box 6327 Tallahassee, FL 32314 Division of Corporations Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



SuperPharma

(Name of Corporation as currently filed with the Florida Dept. of State)

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

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RETURNED CHECK The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp,," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

D. <u>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>

Name of New Registered Agent		
	(Florida street address)	<del></del>
New Registered Office Address:		, Florida
	(City)	(Zin Code)

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

I hereby accept the appointment as registered agent. I 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 <math>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	PT John Doc	FILING O	CANCELLED	
X Remove	V Mike Jone		RETURNED CHECK	
X Add	SV Sally Smi	i <u>th</u>		
Type of Action (Check One)	<u>Title</u> <u>1</u>	<u>Name</u>	<u>Addres</u> s	
1) X Change	<u>P</u>	Onahira Rivas	6349 Castelven	
Add			Dr # 101 - Orlando	
Remove		•	FL- 32835	
2) X Change	$\supseteq$ (	Drahira Rivas	6349 Castelven	
Add			Dr # 101-Orlando	
Remove	$\sim$ 1		FL- 32835	
3) X Change	<u>D</u> +	ernando homález	6349 Castelven	
Add			Dr# 101-Orlando	
Remove	•,		#L- 32835	
4) Change			**************************************	
Add				
Remove				
5) Change				
Add			<del></del>	
Remove				
6) Change	<del></del>		<del></del>	
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)
We need to Psoved a Shares Certification as
Follow
Onahira Teresa Rivas Dioses 1600 Shares
Follow Onahira Teresa Riras Dioses 1600 Shares Fernando Carmelo Gonzalez Padilla 400 Shares
,
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RETURNED CHECK
F. 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:
(if not applicable, indicate N/A)
We need to issued a shares Certification as
follow
Onahira Teresa Rivas Droses 1600 Shares Fernando Carmelo Gonzalez Padilla 400 Shares
Fernando Carmelo Gonzalez Padilla 400 Shaves

The date of each amendment(s) adoption: September 1 <sup>57</sup> 2015, if other than the date this document was signed.
Effective date if applicable:  (no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by"  (voting group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated September 15T 2015
Signature (By a director, president) other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
ONAHINA TERESA RIVAS DOSES (Typed or printed name of person signing)
Director-President-Owner (Title of person signing)

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