Division of Corporations

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H220000013503)))



H220000013503ABCN

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number :

: (850)617-6380

From:

Account Name : GRACE NORWICH CPA

Account Number : I19990000092 Phone : (561)844-9806

Fax Number : (561) 689-1131

er the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email	Address:	 	

COR AMND/RESTATE/CORRECT OR O/D RESIGN O & G THERAPEUTIC INC.

O O O XIIZIGII ~	
Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$35.00

JAN 0 4 2021

A. LUNT

SECEIV!

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: O & G THERAPETI	C INC.	
DOCUMENT NUME	BER: P15000063533		
	of Amendment and fee are subr	nitted for filing.	
Please return all corres	spondence concerning this matte	er to the following:	
	CHUNSHENG GAO		
•		Name of Contact Person	
	O & G THERAPETIC INC.		
		Firm/ Company	
	4996B W ATLANTIC BLVD		
		Address	
	MARGATE, FL 33063	_	
		City/ State and Zip Code	
	CSHENGGAO81@GMAIL.C	COM	
	E-mail address: (to be use	ed for future annual report	notification)
For further information	on concerning this matter, pleas		492-4793 de & Daytime Telephone Number
	e of Contact Person	Area Coo	de & Daytime Telephone Number
	for the following amount made:	payable to the Florida Depa	irtment of State:
□ \$35 Filing Fee	S43.75 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)
A D P.	mendment Section ivision of Corporations O. Box 6327 Inlahassee, FL 32314	Ameno Divisio The C 2415	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

O & G THERAPETIC INC.		
(Name of	Corporation as currently filed with the Florida Dept. of State	
P15000063533		
	(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	(Document Number of Corporation (if known) 006, Florida Statutes, this Florida Profit Corporation adopts the f	ollowing amendmen
A. If amending name, enter the new nar	ne of the corporation:	
		The new
"Inc.," or Co.," or the designation "Co "chartered," "professional association," (breviation "Corp.," t contain the word
B. Enter new principal office address, it (Principal office address MUST BE A ST	[applicable: REET ADDRESS]	
C. Enter new mailing address, if applie (Mailing address MAY BE A POST C	PRICE BOX	
	d/or registered office address in Florida, enter the name of the	<u> </u>
new registered agent and/or the new	registered office address:	
_	HUOLIAN OU	
Name of New Registered Agent	470 N LAUREL DR 6A	
	(Florida street address)	
	MARGATE , Florida	33063
New Registered Office Address:	(Ciny)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regis.	hanging Registered Agent: tered agent. I am familiar with and accept the obligations of the	position.
x thol	Signature of New Registered Agent, if changing	
/	Signature of New Registered Agent, if changing	

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	<u>PT</u> Joh	n Doe	
X Remove	<u>v</u> <u>Mil</u>	ke Jo <u>nes</u>	
_X Add	<u>SV</u> <u>Sal</u>	Jy Smith	
Type of Action	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
(Check One)	P	CHUNSHENG GAO	470 N LAUREL DR 6A
1)Change	<u>-</u>		MARGATE, FL 33063
Add X			
Keniove	P	HUOLIAN OU	470 N LAUREL DR 6A
2) Change X Add			MARGATE, FL 33063
Remove 3) Change			
Add			
Remove 4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Remove			

	ticles, enter change(s) here: . (Be specific)
· · · · · · · · · · · · · · · · · · ·	
<u></u>	
	_
an amendment provides for an e	xchange, reclassification, or cancellation of issued shares, amendment if not contained in the amendment itself:
rovisions for implementing the a	\
	,
(if not applicable, indicate N/A)	
(іј поі арріісадіе, іпаісаге МА)	
(ij not applicable, inalcate N/A)	
(ij not applicable, inalcate N/A)	
(ij noi applicație, inaicate N/A)	
(ij not applicable, inalcate N/A)	

•

	01/01/2022	, if other than the
The date of each amendment(s) adoption:	_,
date this document was signed.	01/01/2022	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date will repeartment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
action was not required.	e adopted by the incorporators, or board of directors without shareholder action and s	hareholder
by the shareholders was/we		
must be separately provide	e approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s): cast for the amendment(s) was/were sufficient for approval	V 10% JE 2022 JAN -
by	(voting group)	ω $\frac{\partial}{\partial z}$
Dated/ Signature /	(voting group) 2/29/202 Gao By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court propinted fiduciary by that fiduciary)	OF SIMILE AND ANIO: 17
	Chunsheng Gao (Typed or printed name of person signing) Dresident (Title of person signing)	
	(Title of person signing)	