Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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

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COR AMND/RESTATE/CORRECT OR O/D RESIGN ADVANCED PHARMA RESEARCH INC.

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H16000308563 3

<u>COVER LETTER</u>

TO: Amendment Sect Division of Corp		•		
NAME OF CORPO	RATION: ADVANCED PHA	RMA RESEARCH INC.		
DOCUMENT NUM	D16000061460			
The enclosed Articles	of Amendment and fee are sul	omitted for filing.		: · · .
Please return all corre	spondence concerning this mat	ter to the following:		
	MARICELA FAROY NIEVE	ES		
		Name of Contact Person	L	
	ADVANCED PHARMA RE	SEARCH INC.		
		Firm/ Company		 .
	2150 LAKE IDA RD., STE 7	,		
	•	Address		
	DELRAY BEACH, FL 3344			
		City/ State and Zip Code		<u> </u>
Ma den	celafaroy@advancedpharmare	rearch com		
mai		ed for future annual report	notification)	
	L-man audiess. (to be us	MI 101 14441 C MONTHAN TEPOST	in the state of th	
For further information	on concerning this matter, pleas	e call:	4	
MARICELA FARO	Y	at (305	266-1945	
Name	of Contact Person	Area Co	de & Daytime Telephone Nu	mber
Enclosed is a check i	or 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)	
An Dî P.0	niling Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Ameno Divisio Cliftor 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301	

4160003085633

Articles of Amendment to Articles of Incorporation of

ADVANCED PHARMA RESEARCH INC.		•
(Name of Corporation as curren	ity filed with the Florida D	ept. of State)
P16000051469		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this articles of Incorporation.	s Florida Profit Corporation	a adopts the following amendment(
. If amending name, enter the new name of the corporation:		
N/A		The new
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional coru	rporated" or the abbreviation
3. Enter new principal office address, if applicable:	N/A	
Principal office address MUST BE A STREET ADDRESS)		
	· · · · · · · · · · · · · · · · · · ·	
Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)	N/A	
	4	
 If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre 	dress in Florida, enter the 1 88:	name of the
Name of New Registered Agent N/A	•	
		
Name of the Wastered Age/H		
(Fiorida s	treet address)	
		, Florida

Page 1 of 4

H16000308563 3

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	<u>y</u>	Mike Jones	•
X Add	<u>sy</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
l)Change	VP	YBSENIA DIAZ	3715 SW 62 CT
X Add		;	MIAMI, FL 33155
Remove			
2)Change			
Add		; • .	
Remove			
3)Change		<u> </u>	
Add			
Remove			
4) Change			
Add			
Remove			
5)Change			
Add			
Remove			
6) Change			
Add		,	
Remove			

Page 2 of 4

H16000308563 3

VA.	
A A A A A A A A A A A A A A A A A A A	
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,	: · ·
If an amendment provides for an exchange, reclassification, or convisions for implementing the amendment if not contained in (if not applicable, indicate N/A)	cancellation of issued shares, the amendment itself:
<u>A</u>	
, , , , , , , , , , , , , , , , , , , ,	
 .	

H (600030 85.00)

The date of each amendment(s) a	loption:	, if other than the
date this document was signed.		
	6/2016	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this be document's effective date on the De	clock does not meet the applicable statutory filing requirements, this date partment of State's records.	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
☐ The amendment(s) was/were approvided for must be separately provided for	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	at
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adaction was not required.	opted by the board of directors without shareholder action and shareholder	•
The amendment(s) was/were addaction was not required.	opted by the incorporators without shareholder action and shareholder	
12/16/2010	5	
Dated	·	
Signature	T-pay	·
	lifector, presided or other officer — if directors or officers have not been d, by an incorporator — if in the hands of a receiver, trustee, or other court	
	n, by an incorporator — It in the hands of a receiver, trustee, or other count ned fiduciary by that fiduciary)	
•••	MARICELA FAROY NIEVES	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of namon signist)	