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16 JUL -6 PH 2: 2:

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION: CRO SERVICES, I	NC				
DOCUMENT NUME	BER:					
The enclosed Articles	of Amendment and fee are sub	omitted for filing.				
Please return all corres	spondence concerning this mat	ter to the following:				
	CARLOS ROSAS OLVERA					
		Name of Contact Person	1			
		Firm/ Company				
	2555 PGA BOULEVARD LOT 90					
		Address				
	PALM BEACH GARDENS,	FL 33410				
		City/ State and Zip Cod	e			
croinc	e@hotmail.com					
	E-mail address: (to be us	ed for future annual report	notification)			
For further information	n concerning this matter, pleas	e call:				
Carlos Rosas Olvera		at (⁵⁶¹				
Name o	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	r the following amount made p	ayable to the Florida Depa	artment 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)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

16. JUL -6 PM 2: 23

CRO SERVICES, INC

(<u>Name of</u> 916000051586	C	
16000051586	Corporation as curren	tly filed with the Florida Dept. of State)
	(Document Number	of Corporation (if known)
cursuant to the provisions of section 607.10 s Articles of Incorporation:	006, Florida Statutes, thi	s Florida Profit Corporation adopts the following amendment(
A. If amending name, enter the new nam	ne of the corporation:	
		The new
ame must be distinguishable and contai "Corp.," "Inc.," or Co.," or the designat word "chartered," "professional association	ion "Corp," "Inc," or	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
B. Enter new principal office address, if	if applicable:	CARLOS ROSAS OLVERA
Principal office address <u>MUST BE A STR</u>		2555 PGA BOULEVARD LOT 90
		PALM BEACH GARDENS, FL 33410
 Enter new mailing address, if applica (Mailing address MAY BE A POST OF) If amending the registered agent and/ 	FFICE BOX)	dross in Florida, anter the name of the
new registered agent and/or the new i		
Name of New Registered Agent CARLOS ROSA		 -
	555 PGA BOULEVAR	D LOT 90
	(Florida s	treet address)
New Registered Office Address:	ALM BEACH GARDE	NS , Florida 33410
		(City) (Zip Code)

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 Doc 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>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) X Change	P	Carlos Rosas Olvera	2555 PGA Blvd Lot 90
Add			Palm Beach Gardens, FL 33410
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	-		
Add			
Remove			
6) Change			
Add			A
Remove			

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an amendment provides	for an exchang ing the amendn	nent if not contai	ned in the amend	lment itself:	
an amendment provides provisions for implement (if not applicable, indi	ing the amendn	nent if not contai	ned in the amend	lment itself:	
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f an amendment provides provisions for implement (if not applicable, indi	ing the amendn	nent if not contai	ned in the amend	Iment itself:	

The date of each amendment(s) ado	June 29, 2016 ption:	, if other than the
date this document was signed.		
Effective date if applicable:		
 	(no more than 90 days after amendment file dat	e)
Note: If the date inserted in this blo document's effective date on the Department.	ck does not meet the applicable statutory filing requirement of State's records.	nts, this date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopt by the shareholders was/were suff	ed by the shareholders. The number of votes cast for the an cient for approval.	nendment(s)
	oved by the shareholders through voting groups. The following ach voting group entitled to vote separately on the amendment	
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopt action was not required.	ed by the board of directors without shareholder action and	shareholder
☐ The amendment(s) was/were adopt action was not required.	ed by the incorporators without shareholder action and share	eholder
06/29/2016 Dated		
Signature <u>Coul</u>	as Rosas Olver.	
selected,	ector, president or other officer – if directors or officers have by an incorporator – if in the hands of a receiver, trustee, or d fiduciary by that fiduciary)	
C	ARLOS ROSAS OLVERA	
_	(Typed or printed name of person signing)	
р	RESIDENT/SHARE HOLDER	

(Title of person signing)