P17000010271

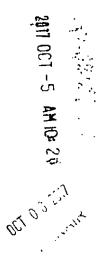
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



500303159855

10/05/17--01002--018 *+85.00



COVER LETTER

		COVER LETTER		*
TO: Amendment Secti Division of Corpo				MOCT -5 MIN 2"
NAME OF CORPOR	RATION: TESLA DIA	GNOSTICS CO	RP	
	_{BER:} P1700001027			S
	of Amendment and fee are su			A. W.
Please return all corres	spondence concerning this ma	tter to the following:		74
	ANGEL O PARG	A		
		Name of Contact Persor		
		Firm/ Company	·	
	85 GRAND CAN			
	MIAMI, FL 33144	Address		
	, , , , , , , , , , , , , , , , , , , ,	City/ State and Zip Code	•	
INF	O@ACCOUNTIN			
	E-mail address: (to be us	ed for future annual report	notification)	
For further information	n concerning this matter, pleas	e call:		
ANGEL O PA	ARGA	at (•	
Name (of Contact Person	Area Co)de & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	rtment of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

TESLA DIAGNOSTICS CORP

		of Amendment to I Incorporation of	ALL OCT S HOUSE
TESLA DIAGNOSTICS (CORP	UI	\(\frac{1}{2}\)
		the Florida Dept. of State)	7
P17000010271			
(Documer	nt Number of Corporation	on (if known)	`
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes,	this Florida Profit Corporation a	adopts the following amendment(s) t
A. If amending name, enter the new na	ame of the corporation	<u>n:</u>	
N/A name must be distinguishable and com "Corp.," "Inc.," or Co.," or the design word "chartered." "professional associa	nation "Corp." "Inc."	or "Co". A professional corpor	
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>		N/A	
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		N/A	
D If amending the registered agent an		address in Florida, enter the na	me of the
new registered agent and/or the new Name of New Registered Agent	N/A		_
new registered agent and/or the new		da street address)	_
new registered agent and/or the new			- -

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 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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	V	ROLANDO TORRES	85 GRAND CANAL DR.
Add			#209
Remove			MIAMI, FL 33144
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	<u> </u>		<u></u>
Add			
Remove			
6) Change		····	
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N/A
· · · · · · · · · · · · · · · · · · ·
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)
N/A

The date of each amendment(s) adoption: N/A date this document was signed.	, if other than the
- N/(A	
Effective date if applicable: (no more than 90 days after amendment file date)	_
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_09/29/2017	
Signature	
(By a director, president or 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)	
ANGEL O PARGA	
(Typed or printed name of person signing)	-
PRESIDENT Programme	