

P17000033741

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

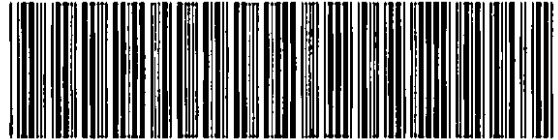
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

*Wang Form*

Office Use Only



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10/28/20--01021--007 \*\*118.75

21 JAN -6 PM 2:48

NEW STATE  
NOTICE

JAN 06 2021

D CUSHING

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: IMMUNO AMERICAN CORP

DOCUMENT NUMBER: P17000033941

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Edmar Dalla Torre Torres  
Name of Contact Person

IMMUNO AMERICAN CORP  
Firm/ Company

12385 SW 129 Court #12  
Address

MIAMI FL 33186  
City/ State and Zip Code

financial@IMMUNO AMERICAN CORP  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Claudete Barberi ND at (305) 761 1171  
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:

- |  |  |   |   |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input checked="" type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |
|--|--|---|---|

**Mailing Address**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**  
Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

21 JAN -6 PM 2:48

RECEIVED  
FLORIDA DEPARTMENT OF STATE  
JAN 21 1996

ET

## **Claudette Barberino**

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**Subject:** Certificate of Amendment

**Expires:** Friday, October 30, 2020 12:00 AM

Please contact me if you have any question

Edmar Dalla Torre Torres: 786-501-0630

Claudette Barberino: 305-761-1171

\*) \*)

Thank you! \*) \*)

(, , Best regards

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## **Claudette Barberino**

Int'l Sales Director

(+1) 305-735-2280 Direct Line

(+1) 305 761-1171 WhatsApp



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 14, 2020

EDMAR DALLA TORRE TORRES  
IMMUNO AMERICAN CORP  
12385 SW 129TH COURT SUITE 12  
MIAMI, FL 33186

SUBJECT: IMMUNO AMERICAN CORP  
Ref. Number: P17000033741

We have received your document for IMMUNO AMERICAN CORP and your check(s) totaling \$113.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Limited Partnership, but your entity is a Corporation. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing  
Senior Section Administrator

Letter Number: 220A00025217

*Received  
by Fed Ex  
1/6/21*

Immuno American Corp

P17000033741

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CB

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:

☒ Change      PT      John Doe

☐ Remove      V      Mike Jones

☐ Add      SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<input checked="" type="checkbox"/>	Claudete Lima	16400 SW
<input checked="" type="checkbox"/> Add		Barberino	137 Ave
<input type="checkbox"/> Remove			APT. 332
2) <input type="checkbox"/> Change			MIAMI FL
<input type="checkbox"/> Add			33177
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

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(Attach additional sheets, if necessary). (Be specific)

(if not applicable, indicate N/A)

The date of each amendment(s) adoption: 11/11/2020, if other than the date this document was signed.

Effective date if applicable: 11/11/2020  
(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 incorporators, or board of directors without shareholder action and shareholder action was not required.

☐ 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)

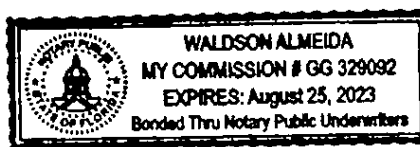
Dated 12/30/2020

Signature Edmar Dalla Torres

(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)

Edmar Dalla Torre Torres  
(Typed or printed name of person signing)

President  
(Title of person signing)



waldson 01/05/2021

ET  
CB