P17000075154

(Ř	equestor's Name)
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(C	ity/State/Zip/Phor	ne #)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: BIOANYWHERE	INC		
	IBER: P17000075154			
The enclosed Article	es of Amendment and fee are su	bmitted for filing.		
Please return all corr	respondence concerning this ma	tter to the following:		
	ANDRES GARCIA MONTO	DYA		
	4 ·	Name of Contact Person	1	
	BIOANYWHERE INC			
		Firm/ Company		
	242 RIVERWALK CIRCLE			
		Address		
	SUNRISE, FL 33326			
		City/ State and Zip Code		
MIC	GLO1234@COMCAST.NET			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informati	ion concerning this matter, pleas	se call:		
ANDRES GARCIA	. MONTOYA	786	de & Daytime Telephone Number	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment 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)	
_	ailing Address		Address	
A	nendment Section	Amend	Iment Section	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation οf BIOANYWHERE INC

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2017 OCT 24 PH 1: 23

(Name of Corporation as currently	filed with the Florida De	ept. of State) .		
P17000075	154	i.`L	$\beta_{i}:\mathbb{C}_{i}$	1089
(Document Number of C	Corporation (if known)			
ursuant to the provisions of section 607.1006, Florida Statutes, this Fl s Articles of Incorporation:	lorida Profit Corporation	adopts the follow	wing ame	 ndment(s)
. If amending name, enter the new name of the corporation:				
			The	new
ame must be distinguishable and contain the word "corporation, Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co ord "chartered," "professional association," or the abbreviation "P.	o". A professional corpe	porated" o <mark>r the</mark> pration nam e m i	e abbrev ust contai	iation in the
Enter new principal office address, if applicable:	·			·
Principal office address <u>MUST BE A STREET ADDRESS</u>)				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			i	
				_
If amending the registered agent and/or registered office address	ss in Florida, enter the <u>n</u>	ame of the		
new registered agent and/or the new registered office address:			ŀ	
Name of New Registered Agent		.		
	i address)		·	
New Registered Office Address:	,	, Florida		
	Муу		Lip Code)	
ew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent.—I am familiar wi	th and accept the obligation	ons of the positio	on.	
Signature of New Rea	vistered Agent, if changing		·	

address of each Office (Attach additional shee Please note the officer, P = President; V = Vic Executive Officer; CF, held. President, Treast Changes should be not a change, Mike Jones Mike Jones, V as Rema	er and/or 1 ets, if neces (director tit ce Presiden O = Chief arer, Direct ted in the followers the	Director being added: sary) le by the first letter of the office title: t: T= Treasurer: S= Secretary; D= Directo Financial Officer. If an officer/director hol or would be PTD. bllowing manner. Currently John Doe is list	h officer/director being removed and title, name, and by: TR= Trustee; C = Chairman or Clerk; GEO = Chief dis more than one title, list the first letter of each office and the PST and Mike Jones is listed as the V. There is S. These should be noted as John Doe, PT as a Change,
Example: - <u>X-</u> Change	<u> </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	Т	DAVID GARCIA MONTOYA	1400 HI LINE DRIVE, APT 605
X Add		-	DALLAS, TX 75207
Remove			
2) Change		<u></u>	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Articles, enter change(s) here:	
(Attach additional sheets, if necessary). (Be specific)	
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. 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)	
уна аррасияе, такие мау	
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	<u> </u>

10/05/17	
The date of each amendment(s) adoption:	, if other than th
10/05/17	
Effective date <u>if applicable</u> : (no more than 90 days after amendment file	date)
Note: If the date inserted in this block does not meet the applicable statutory filing require document's effective date on the Department of State's records.	ments, this date will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east for the by the shareholders was/were sufficient for approval.	e amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following the separately provided for each voting group entitled to vote separately on the amendment.	
"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 action was not required.	and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and s action was not required.	shareholder
Dated	, }
Dated 10 2017 Signature Fhares Garcia Montbyy	
(By a director, president or other officer – if directors or officers leelected, by an incorporator – if in the hands of a receiver, trustee appointed fiduciary by that fiduciary)	
ANDRES GARCIA MONTOYA	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	