P18000035930

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000153641 3)))

H19000153641 3ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

FILED
2019 MAY -9 AM 10:34
SECRETARY OF STATE
TALLAHASSEE, FL

To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

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

Email Address: _____

S TALLENT
MAY 10 2019

COR AMND/RESTATE/CORRECT OR O/D RESIGN
MOONSHINE CLINICAL RESEARCH, INC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	$35.00

RECEIVED
2019 MAY -9 PM 2:43
SECRETARY OF STATE
TALLAHASSEE, FL

Amend

Articles of Amendment
to
Articles of Incorporation
of

MOONSHINE CLINICAL RESEARCH, INC

Florida Document Number: P19000035930

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

CHANGE ADDRESS FROM: 75 EAST 63 STREET HIALEAH FL 33013 TO THE NEW ADDRESS: 14905 SW 29TH TERRACE MIAMI, FL 33185

FILED
2019 MAY -9 AM 10:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

These articles of amendment were adopted on 05/09/19

The corporation has only one group of voting stock. This amendment was approved by the shareholders and the number of votes cast for amendment was sufficient for approval.

Signature

Sheila Linares, President
Printed Name and Title

New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing