## P18000076093

(Rec	questor's Name)	
(Add	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	<del>: #)</del>
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PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(100	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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January 18, 2019

LIFETIME OMICS PATRICIA BUENDIA 1840 S TREASURE DR, STE. 1 NORTH BAY VILLAGE, FL 33141

SUBJECT: LIFETIME OMICS Ref. Number: P18000076093

We have received your document for LIFETIME OMICS and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(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) 245-6051.

Letter Number: 019A00001497

Karen A Saly Regulatory Specialist II

www.sunbiz.org

Attn: Karen Saly

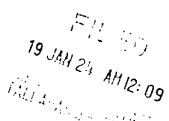
Fax: 850-245-6030

## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: LIFETIME OMIC	es		
	4BER: P18000076093			
The enclosed Article	es of Amendment and fee are su	abmitted for filing.		
Please return all corr	respondence concerning this ma	atter to the following:		
	Patricia Buendia			
		Name of Contact Perso	n	
	LIFETIME OMICS, INC.			
		Firm/ Company		
	1840 S Treasure Dr. Apt 1			
		Address		
	North Bay Village, FL 3314	1		
		City/ State and Zip Cod	e	
paty	@lifetimeomics.com			
<u></u> -		sed for future annual report	notification	
For further informati Patricia Buendia	on concerning this matter, plear		. 252-219 <del>5</del>	
Name	of Contact Person	at (Area Co	) 252-2195 ide & Daytime Telephone Number	
Enclosed is a check f	for the following amount made			
\$35 Filing Fee	□\$43.75 Filing Fee &	□\$43.75 Filing Fee &	□\$52,50 Filing Fee	
heck	Certificate of Status	Certified Copy (Additional copy is	Certificate of Status Certified Copy	
ached		enclosed)	(Additional Copy	
14 20	19		is enclosed)	
heck ashed Jan 14, 20	ailing Address	Street	Address	
א כים 🔍 🗀 Am	nendment Section	Amendment Section		
PC	vision of Corporations D. Box 6327	Division of Corporations Clifton Building		
	llahassee, FL 32314	Clifton Building 2661 Executive Center Circle		
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## Articles of Amendment to Articles of Incorporation of



LIFETIME OMICS			48.7.7.7.7.7.7.7.7.7.7.7.7.7.7.7.7.7.7.7
(Name of	f Corporation as currently filed with the Florida I	Dept. of State)	
18000076093		-	
	(Document Number of Corporation (if known)		
Pursuant to the provisions of section 607.1 ts Articles of Incorporation:	1006, Florida Statutes, this Florida Profit Corporation	on adopts the followin	g amendment(s)
. If amending name, enter the new ngi	me of the corporation:		
LIFETIME OMICS, INC.			
name must be distinguishable and conto "Corp.," "Inc.," or Co.," or the designa word "chartered," "professional associati	ain the word "corporation," "company," or "incustion "Corp," "Inc," or "Co". A professional corpion," or the abbreviation "P.A."	orporated" or the a poration name must o	_The new bbreviation contain the
3. Enter new principal office address, it Principal office address MUST BE A ST	( applicable: REET ADDRESS )		
. Enter new mailing address, if applic	able:		
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O	PFFICE BOX)		
Enter new mailing address, if applic (Mailing address MAY BE A POST O	able: PFFICE BOX)		
(Mailing address <u>MAY BE A POST O</u>	Vor registered office address in Florida, enter the	name of the	
(Mailing address MAY BE A POST O	Vor registered office address in Florida, enter the	лате of the	
(Mailing address MAY BE A POST O	Vor registered office address in Florida, enter the registered office address:	name of the	
(Mailing address MAY BE A POST O	Vor registered office address in Florida, enter the	name of the	

Page I of 4

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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	PT	John Doe	N/A		<b>19</b>
X Remove	<u>v</u>	Mike Jones	10/11		學量
X Add	<u>sv</u>	Sally Smith			19 JH 21
Type of Action (Check One)	<u>Title</u>	Name		<u>Addres</u> s	
1) Change		<u> </u>		<u> </u>	- The state of the
Add					
Remove					
2) Change				<del>-</del>	
Add					
Remove					
3)Change					
Add					
Remove					
4)Change			·		
Add				<del>_</del>	
Remove					
5) Change					
Add				-	
Remove					
Change					
Add					
Remove					

	F/1 50
E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	19 JAN 24 AH 12: 05
<u> </u>	<u> </u>
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<u> </u>	
If an amendment provides for an exchange, reclassification, or cancellation o provisions for implementing the amendment if not contained in the amendment	fissued shares,
(y not applicable, indicate N/A)	ent itself:
N/A	
·	
	·

The date of each amendment(s) date this document was signed.	adoption: January a	2,2019	, if other than the
Effective date if applicable;			
	(no more than 90 day	vs after amendment file date)	<del></del>
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable Department of State's records.	statutory filing requirements, this date will	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number officient for approval.	ber of votes cast for the amendment(s)	19 14
The amendment(s) was/were apmust be separately provided for	oproved by the shareholders through ver each voting group entitled to vote s	voting groups. The following statement separately on the amendment(s):	211 =
"The number of votes cas	t for the amendment(s) was/were suff	ficient for approval	5.0
by			9
	(voting group)		The state of the s
☐ The amendment(s) was/were ac action was not required.	opted by the board of directors witho	out shareholder action and shareholder	
The amendment(s) was/were ac action was not required.	opted by the incorporators without sh	hareholder action and shareholder	
January 8 Dated	2019		
Signature	P. Buch		
selecti	lirector, president or other officer - it	f directors or officers have not been is of a receiver, trustee, or other court	-
	Patricia Buendia		
	(Typed or printed name of	of person signing)	<del></del>
	Chief Executive Officer		
	(Title of pers	on signing)	<del></del>