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| (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: |
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Amend

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I ALBRITTON

COVER LETTER

TO: Amendment Section

| Division of Corporations |
|---|
| NAME OF CORPORATION: SOCIETE CANCARIX TNC. DOCUMENT NUMBER: P200000 42924 |
| The enclosed Articles of Amendment and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| ENIE PERALTA - JIMENEZ Name of Contact Person |
| 8901 NW 194th Ter |
| MIAMI, FL 33018 City/ State and Zip Code |
| E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Name of Contact Person at (305) 305-1950 Area Code & Daytime Telephone Number |
| 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: |
| S\$\frac{1}{35}\$ Filing Fee \begin{array}{cccccccccccccccccccccccccccccccccccc |
| Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee |

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

| of | | |
|--|--|-----------------------------------|
| SOCIETE CA | NCARIX INC | |
| (Name of Corporation as currently | y filed with the Florida Dept. of State) | |
| P200000424 | 124 | |
| (Document Number of | f Corporation (if known) | |
| Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>I</i> its Articles of Incorporation: | Florida Profit Corporation adopts the follo | owing amendment(s) to |
| A. If amending name, enter the new name of the corporation: | | |
| | | Thenew |
| name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A "chartered," "professional association," or the abbreviation "P.A." | ompany," or "incorporated" or the abbrever professional corporation name must co | viation "Corp" ontain the word |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) | | |
| | | 2 |
| • | | 120 |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | (|
| | | |
| | | Z: \- |
| | | |
| D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address: | | 56 |
| Name of New Registered Agent | | |
| | | |
| (Florida stre | et address) | |
| New Registered Office Address: | , Florida | |
| • | (City) | Zip Code) |
| | | |
| New Registered Agent's Signature, if changing Registered Agent: | | |
| I hereby accept the appointment as registered agent. I am familiar w | with and accept the obligations of the positi | ion. |
| | | |
| | | <u> </u> |
| Signature of New Re | gistered Agent, if changing | |
| Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (| e), F.S. | |

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 Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held

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 Ada.

| Example: X Change | PT Join Doe | |
|---------------------------------------|----------------|-----------------|
| ∑ Remove | V Mike Jones | |
| X Add | SV Sally Smith | . :: |
| Type of Action (Check One) 1) Change | P SHON CAmpbe | Apr 1105 |
| Add Remove Change | P PEDROF ESCA | 1) 1 (150) |
| Add Remove Change Add | | MIAMI, R. 33/60 |
| Remove Change Add | | |
| Remove 5/ Change Add | | |
| Remove | | |
| Add Remove | | |

| | Iding additional Art sheets, if necessary). | (Be specific) | | | |
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| <u>f an amendment</u> | provides for an excl | nange, reclassifica | tion, or cancellati | ion of issued shares | 1 |
| (if not applie | nplementing the ame able, indicate N/A) | endment if not con | itained in the ame | endment itself: | |
| (у погарутс | ane, mulcule tory | | | | |
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| The date of each amendment(s) adoption: |
|--|
| Effective date if applicable: |
| (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 east for the amendment(s) was/were sufficient for approval |
| |
| by |
| Dated |
| (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) |
| Tho Compbell (Typed or printed/name of person signing) |
| Mesa De |
| (Title of person signing) |