

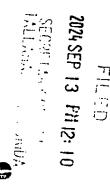
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68/1. 44-4. Jul--14 ##88.0.



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: RADEX INSTITU	TE INC	
DOCUMENT NUMB			<u></u>
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	MAHA MOBASHER		
-		Name of Contact Person	n
	PEARA UNIVERSITY INC		
-		Firm/ Company	
	150 S PINE ISLAND RD ST	E 360	
-	-	Address	
	DAVIE, FL 33324		
-		City/ State and Zip Cod	e
	MAHAMOBASHER@YAH	OO.COM	
-	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call;	
MAHA MOBASHER		954 at (	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 Dep	artment of State:
S35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ing Address ndment Section tion of Corporations Box 6327 hassee, FL 32314	Ameno Divisio The C 2415 i	Address  Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

## Articles of Amendment Articles of Incorporation of

(Name of Cornerati	on as currently filed with the Florida Dept. of State)	_
( <u>Name of Corporati</u> P21000008207	n as currently fued with the Florida Dept. of State)	
	ent Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Floridate Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amend	dment(s)
A. If amending name, enter the new name of the co	rporation:	
PEARA UNIVERSITY INC	The v	new
	rporation," "company," or "incorporated" or the abbreviation "Corporation". A professional corporation name must contain the weiation "P.A."	
B. Enter new principal office address, if applicable Principal office address MUST BE A STREET ADD		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO  D. If amending the registered agent and/or registered new registered agent and/or the new registered  Name of New Registered Agent	ed office address in Florida, enter the name of the	
	(Florida street address)	
New Registered Office Address:	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Regineral hereby accept the appointment as registered agent.	istered Agent: I am familiar with and accept the obligations of the position.	
Sign	ture of New Registered 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. 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: X Change	<u>PT</u>	John Doe	
X Remove	$\underline{V}$	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			
Add			<del></del>
Remove			
2) Change			<u> </u>
Add			<del></del>
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		<u> </u>	
Add			
Remove			
6) Change			
Add			
Remove			

	<del></del>			
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			<del>-</del>	
	•			
If an amendment provides for an exch	ango roclassifica	ation or concellation	of issued shares	
provisions for implementing the amer	ndment if not cor	ntained in the amen	lment itself:	
(if not applicable, indicate N/A)				
				· · · · · · · · · · · · · · · · · · ·
			<u>.</u>	
	1.8.7			

	ich amendment(s) a nent was signed.	doption:	, if other that
	09/0	06/2024	
Effective date	if applicable:	íno more than 90 days after amendment filo	e date)
		block does not meet the applicable statutory filing requirepartment of State's records.	rements, this date will not be listed a
Adoption of A	mendment(s)	( <u>CHECK ONE</u> )	
	ment(s) was/were ade not required.	opted by the incorporators, or board of directors without s	shareholder action and shareholder
		opted by the shareholders. The number of votes east for tufficient for approval.	he amendment(s)
must be se	parately provided for	proved by the shareholders through voting groups. The fare each voting group entitled to vote separately on the ame.  for the amendment(s) was/were sufficient for approval	
by _		<u>;</u> -	
, <del>-</del>	1	(voting group)	
	09/06/2024 Dated	<del>1</del>	
	Signa <del>ture / /</del>	ah ha	
	(By a d selecte	lirector, president or other officer – if directors or officers ed, by an incorporator – if in the hands of a receiver, truste tied fiduciary by that fiduciary)	
		MAHA MOBASHER	
		(Typed or printed name of person signing)	
		( ) from an farming a farmen anguing,	
		PRESIDENT	