

P21000095460

(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:

Office Use Only



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2025 JUN -6 AM 8:23

TALLAHASSEE, FLORIDA

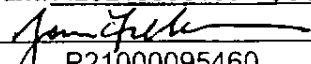
RECEIVED

2025 JUN -5 PM 4:25

TALLAHASSEE, FLORIDA

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

Please use funds from the account: 120210000160: \$35.00

Authorized Signature 
Wellness Research Center Inc. P21000095460

Business Name _____ #Document _____

Walk in _____ Will wait _____

_____ Certified Copy of the Articles

_____ Certificate of Status

NEW FILINGS

_____ Profit
_____ Not for Profit
_____ LLC
_____ Domestication
_____ INC
_____ CORP
_____ PLLC
_____ GP

AMENDMENTS

☒ Amendment
_____ Resignation of Member/MGR
_____ Resignation of Registered Agent
_____ Revocation of Dissolution
_____ Conversion
_____ Statement of Correction
_____ Merger
_____ DISSOLUTION

OTHER FILINGS

_____ TRANSMITTAL LETTER

_____ Fictitious Name -

_____ Statement of Authority
business

_____ APOSTIL _____
COUNTRY

REGISTRATION/QUALIFICATIONS

_____ Foreign Filing
_____ Partnership
_____ Reinstatement
_____ Articles of CORRECTION
_____ Withdraw of Certificate of Authority
_____ TRADEMARK
_____ Domestication

_____ Other

EXAMINER'S INITIALS: _____



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 6, 2025

FLORIDA CAPITAL COURIER SERVICES

SUBJECT: WELLNESS RESEARCH CENTER INC
Ref. Number: P21000095460

We have received your document for WELLNESS RESEARCH CENTER INC and your check(s) totaling \$. 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).

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan
Regulatory Specialist III

Letter Number: 825A00012216

2025 JUN -6 PM 4:05

Articles of Amendment
to
Articles of Incorporation
of

WELLNESS RESEARCH CENTER INC

FILED

2025 JUN -6 AM 8: 23

(Name of Corporation as currently filed with the Florida Dept. of State)

P21000095460

(Document Number of Corporation (if known))

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

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

Jose M. Roig

1901 SW 1st 2nd Floor

Miami FL 33135

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent Jose M. Roig

1901 SW 1st 2nd floor

(Florida street address)

New Registered Office Address: Miami

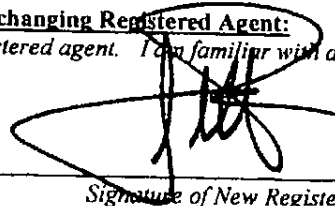
(City)

Florida 33135

(Zip Code)

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

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 PT John Doe

X Remove V Mike Jones

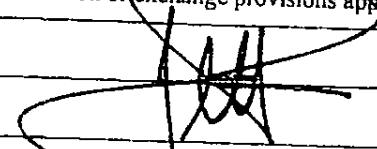
X Add SV Sally Smith

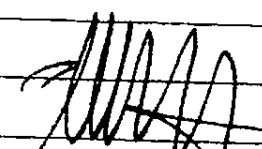
Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<u>PTE</u>	<u>Emilio Mantero-Atienza</u>	<u>1901 SW 1st ST 2nd Floor</u>
<input type="checkbox"/> Add			<u>Miami FL 33135</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>PTE</u>	<u>Jose M. Roig</u>	<u>1901 SW 1st ST 2nd Floor</u>
<input checked="" type="checkbox"/> Add			<u>Miami FL 33135</u>
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	<u>T</u>	<u>Emilio Mantero-Atienza</u>	<u>1901 SW 1st ST 2nd Floor</u>
<input type="checkbox"/> Add			<u>Miami FL 33135</u>
<input checked="" type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	<u>T</u>	<u>Jose M. Roig</u>	<u>1901 SW 1st ST 2nd Floor</u>
<input checked="" type="checkbox"/> Add			<u>Miami FL 33135</u>
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)

The shares previously held by Emilio Mantero Atienza have been transferred in full to José M. Roig for valuable consideration. As a result, Jose M. Roig has 100% (one hundred percent) of the issued shares.

No additional reclassification or exchange provisions apply.


Jose M. Roig


EMANTERO ATIENTA

F. 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)

N/A

The date of each amendment(s) adoption: 5/22/2025, if other than the date this document was signed.

Effective date if applicable: 05/22/2025
(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 cast for the amendment(s) was/were sufficient for approval

by _____
(voting group)"

Dated 5/22/25

Signature

(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)

Jose M Roig

(Typed or printed name of person signing)

Vioce -President

(Title of person signing)

TALLAHASSEE, FLORIDA

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