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TO: Amendment Sect Division of Corpo	ion., • • • • • • • • • • • • • • • • • • •		
NAME OF CORPOR	PARADISUS ME	D RESEARCH INC	
DOCUMENT NUME	P2400009290		
DOCUMENT NUMB	DEK:	<u> </u>	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	FRANCISCO SOLER		
	J.	Name of Contact Perso	n
	->\	Firm/ Company	-
	2627 SW 47 AVE		
		Address	-
	MIAMI, FL 33185		
		City/ State and Zip Cod	e
	paradisusmedicalcenter@yah	ioo.com	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
FRANCISCO SOLER		786	de & Daytime Telephone Number
Name (of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Dep	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 chassec. FL 32314	Ameno Divisio The C 2415 I	Address Ilment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303

Articles of Amendment Articles of Incorporation \mathbf{of}

PARADISUS MED RESEARCH INC			
(Name of Corporation as	currently filed with the Flo	orida Dept. of State)	
P24000009290			
(Document N	umber of Corporation (if kn	nown)	
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	ites, this Florida Profit Corp	noration adopts the following	g amendment(s) to
A. If amending name, enter the new name of the corpora	ation:		
			The new
name must be distinguishable and contain the word "corpora "Inc.," or Co.," or the designation "Corp," "Inc.," or ' "chartered," "professional association," or the abbreviation	Co". A professional corp		on "Corp.,"
B. Enter new principal office address, if applicable:		<u> </u>	
(Principal office address <u>MUST BE A STREET ADDRESS</u>	Σ)		
			
C. Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			-
D. If a monding the registered agent and/or registered of	Gas address in Florida, and	tar the name of the	- -
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office		ier the name of the	
Name of New Registered Agent			
wine of the regardered rigens			-
	lorida street address)		<u> </u>
·	·	m:4-	
New Registered Office Address:	(Ciņ')	, Florida(Zip (Tode)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am for	d Agent: familiar with and accept the	obligations of the position	
r neren) under me appointment us registered agent. Trains	ammar min ana accept inc	onigations by the position.	
		 	_
Signature o	of New Registered Agent, if c	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	Y	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	D	ARNALDO OCANTO ZAMBRANO	140 SW 117TH AVE APT 303
X Add			PEMBROKE PINES, FL 33025
Remove			
2) Change	D	ANGELA GLAUREA PINTO	10363 NW 63RD TER
X Add			DORAL, FL 33178
Remove 3) Change	_		
Add			
Remove			·
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	
		
<u> </u>		
<u></u>		
		
		
f an amendment provides for an exch	ange, reclassification, or cancellation of issued sha	ares,
provisions for implementing the ame	ndment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
		
	——· ——————————————————————————————————	

	02/19/2024	
The date of each amendment(s) date this document was signed.	adoption:	, if other than t
	2/19/2024	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this date value of State's records.	vill not be listed as t
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a action was not required.	idopted by the incorporators, or board of directors without shareholder action a	and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	idopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
02/19/20	7.4	-
Dated		-
Signature		•
(By a selec	director, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other court	
арро	inted fiduciary by that fiduciary)	
	FRANCISCO SOLER	- · · · · · · · · · · · · · · · · · · ·
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	·