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(((11130001737753)))



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#### COR AMND/RESTATE/CORRECT OR O/D RESIGN SCION CARDIO-VASCULAR, INC.

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C. LEWIS

AUG - 6 2013

**EXAMINER** 

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8/5/2013

TO: Amendment Section

# H13000 173775 3

#### COVER LETTER

Division of Corporations		·			
NAME OF CORPORATION: Scion Cardio-Vascular, Inc.					
DOCUMENT NUMBER: P960000310	183	<del></del>			
The enclosed Articles of Amendment and fee are sub					
Please return all correspondence concerning this mate	ter to the following:				
Dale S. Bergma					
Deated 9 And	Name of Contact Person				
Roetzel & Andr					
	Firm/ Company				
	Address				
Fort Lauderdal	·	01			
Torreaddrad	City/ State and Zip Code				
Irana @coionay co	m				
rose@scioncy.co	ed for future annual report i	notification)			
2 13 (10 % 5		······································			
For further information concerning this matter, please call:					
Louis R. Rose	<sub>a.</sub> (305	_, 259-8880			
Name of Contact Person	Area Coe	de & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:					
□ \$35 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filling Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address	Street Address				
Amendment Section		lment Section			
Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building					
P.O. Box 6327 Telighassee, FL 32314		Executive Center Circle			

Tallahassee, FL 32301

→ Florida Department of State

## H13000173775

Articles of Amendment

FILED

	4=	O AUG - E
<b>.</b>	to rticles of Incorporation	SECOND -5 AM 10: 2
A	of	SECRETAGE
Scion Cardio-Vascular, Inc.		SECRETARY OF STATE  TALLAHASSEE. FLORID
(Name of Corporation as currently file	d with the Florida Dept. of State	EON (D
P96000031083		
(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corpo	reation adopts the following amendment(s) to
A. If amending name, enter the new name of the cor	poration:	
Scion BioMedical, Inc.		Th
name must be distinguishable and contain the word	"Manusarius " "Manusarius " au	The new
"Corp.," "Inc.," or Co.," or the designation "Corp.,"	"Inc." or "Co". A professiona	d corporation name must contain the
word "chartered," "professional association," or the a	bbreviation "P.A."	, , , , , , , , , , , , , , , , , , , ,
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADD)	<u>ress</u> )	
		• • • • • • • • • • • • • • • • • • • •
·	<del></del>	
C. Enter new mailing address, if applicable:	-	
(Mulling address MAY BE A POST OFFICE BOX	Q	
		•
•	b	
D. If amending the registered agent and/or register		er the name of the
new registered agent and/or the new registered of	office address:	
Name of New Registered Agent		
A CONTRACTOR OF THE PROPERTY AND CONTRACTOR OF THE PROPERTY OF		
	(Fiorida street adáress)	
New Registered Office Address:		. Horida
MAN REGISTER OFFICE VITAESS.	(City)	(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 abligations of the position

Signature of New Registered Agent, if changing

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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 addittonal sheets, if necessary)

Please note the officer director title by the first letter of the office title:

P = President, V= Vice President: T= Treusurer; 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.

X Change	$\underline{\mathbf{p_T}}$	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>\$V</u>	Sally Sn	nith	
T <u>ype of Action</u> (Check One)	<u>'Title</u>		Name	Address
l)Change		_	4	
Add				
Remove				
2) Change	<del></del>	<del>_</del>		
Add				
Remove				
3)Change		_		
Add				
Кеплочь				
4)Change		<u>_</u> .		
Add			•	
Remove				
5) Change		_		
A dd				
Renove				
6) Change		<del></del>		
Add				
Remove				

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## H1300073775 3

ttach additional	dding additional A sheets, if necessary	v). (Be specifi	ej			
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				·		
an amendment	provides for an enplomenting the a	xchange, recla	ssification, or o	ancellation of t	sued shares,	
irovisions for 11 (if not applic	npiemening ine s cable, indicate N/A	) menament u n	ot contamed in	tite imienomien	i itsell:	
G - 11						
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		1106.
The date of each amendment(s) ac	loption:	Stor
late this document was signed.		TALL AHASS
Effective date <u>if applicable</u> :		THASS
	(no more than 90 days after a	amendment file date)
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of vifficient for approval.	rotes cast for the amondment(s)
	proved by the shareholders through voting greath voting group emilied to vote separate	
"The number of votes cast	for the amendment(s) was/were sufficient t	or approva!
by	(voting group)	
,	(voting group)	
The amendment(s) was/were ada action was not required.	opted by the board of directors without sha	reholder action and shareholder
The amendment(s) was/were adaction was not required.	opted by the incorporators without sharehold	der action and shareholder
Dated Aug	ust 5, 2013	
Signature	ust 5, 2013	
(By # c	director, president or other officer – if directed, by an incorporator – if in the hands of a need fiduciary by that fiduciary)	
	Louis R. Rose	
	(Typed or printed name	of person signing)
	President	
	/Title of newsy	veinning)