

**19800015026**

Florida Department of State  
Division of Corporations  
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**To:**

Division of Corporations  
Fax Number : (850) 617-6380

**From:**

Account Name : HENDRY, STONER & BROWN, P.A.  
Account Number : I20000000241  
Phone : (407) 843-5880  
Fax Number : (407) 425-7905

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: sbrown@lawforflorida.com

**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
W. O. M. WORLD OF MEDICINE USA, INC.**

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**COVER LETTER****TO: Amendment Section  
Division of Corporations****NAME OF CORPORATION:** W.O.M. WORLD OF MEDICINE USA, INC.**DOCUMENT NUMBER:** P98000015026The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gaye GreenwaldName of Contact PersonNorris, McLaughlin & MarcusFirm/ Company721 Route 202-206, Suite 200AddressBridgewater, NJ 08807City/ State and Zip CodeE-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gaye Greenwaldat ( 908 )722-0700Name of Contact PersonArea Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee☐ \$43.75 Filing Fee &  
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enclosed)☐ \$52.50 Filing Fee  
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Certified Copy  
(Additional Copy  
is enclosed)**PAID BY FAX-FILE****Mailing Address**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314**Street Address**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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Articles of Amendment  
to  
Articles of Incorporation  
of

W.O.M. WORLD OF MEDICINE USA, INC.

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

P98000015026

(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:**

N/A

*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**)

N/A

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

N/A

**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 N/A

(Florida street address)

New Registered Office Address: N/A, Florida (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 obligations 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 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:

☒ Change      PT      John Doe  
☒ Remove      V      Mike Jones  
☒ Add      SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	PS	DR. JOHANNES TSCHENE	ROSENHEIMER STRASSE 7
<input type="checkbox"/> Add			BERLIN GERMANY, OC 10781
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	D	DR. CLEMENS SCHOLZ	LEICHHARDTSTRASSE 1
<input type="checkbox"/> Add			BERLIN GERMANY, OC 14195
<input checked="" type="checkbox"/> Remove			
3) <input checked="" type="checkbox"/> Change	DP	Oliver Kopke	Lübecker Straße 15
<input type="checkbox"/> Add			10559 Berlin, Germany
<input type="checkbox"/> Remove			
4) <input checked="" type="checkbox"/> Change	ST	SANDRA WREST	10477 DOWN LAKEVIEW CIRCLE
<input type="checkbox"/> Add			WINDERMERE, FL 34786
<input type="checkbox"/> Remove			
5) <input checked="" type="checkbox"/> Change	AS	Aylin Perry	42648 Robert Trent Jones Dr.
<input type="checkbox"/> Add			ORLANDO, FL 32835
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

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

Article VIII, Bylaws, of the Articles of Incorporation is hereby deleted in its entirety and replaced with the following:

Article VIII

Bylaws

The bylaws of this Corporation shall be adopted and may be altered, amended or repealed and new bylaws may be adopted by the shareholders of this Corporation only.

**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

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The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

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 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)"

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated

07/21/16

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)

Oliver Kupka

(Typed or printed name of person signing)

Director and President

(Title of person signing)

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**P160000 16609**

To: Division of Corporations  
 Fax Number : (850) 617-6380  
 From: Account Name : CORP USA  
 Account Number : 07245003255  
 Phone : (305) 634-3694  
 Fax Number : (305) 633-9696

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

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SEP 07 2016

TIME : 09/02/2016 16:13  
 NAME : CORP USA  
 FAX : 3056339696  
 TEL : 1808062685  
 SER # : BR066J504820

TRANSMISSION VERIFICATION REPORT

*[Handwritten signature]*