P02000110739

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:





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SALL ANASSEF, FLORIDA

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF C	ORPORATION: M.D. Wellne	ss Centers, PA	
DOCUMENT	ΓNUMBER: <u>P04000164794</u>		
The enclosed	Articles of Amendment and fee a	re submitted for filing.	
Please return a	all correspondence concerning thi	is matter to the following:	
	Dr. Marla LaVoice		
	(Name	of Contact Person)	
	(Fin	rm/ Company)	
	19111 Collins Ave., #2806	(Address)	
	Sunny Isles Beach, FL. 33160		,
	(City/S	tate and Zip Code)	
For further inf	formation concerning this matter,	please call:	
Dr. Marla LaVoice (Name of Contact Person)		at (305) 342-979 (Area Code & Daytime	
Enclosed is a	check for the following amount:		
□\$35 Filing Fee	e S43.75 Filing Fee & Certificate of Status	✓ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Statu Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section		Street Address Amendment Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center C	ircle
i ditaliassoo, i ii 525 i 7		Tallahassee, FL 32301	



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 19, 2008

MARLA LAVOICE 19111 COLLINS AVE #2806 SUNNY ISLES BEACH, FL 33160

SUBJECT: M.D. WELLNESS, INC.

Ref. Number: P04000164794

Collect Sendury
Conn Doe
3-27-07

It wany

We have received your document for M.D. WELLNESS, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above listed entity was administratively dissolved or its certificate of authority was revoked for failure to file the 2005 annual report. The entity must be reinstated before this document can be filed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain Regulatory Specialist II

Letter Number: 908A00010428

Articles of Incorporation

M.D. Wellnoss Conters, PA Husky Title ATS Cra	ow, IN
(Name of corporation as currently filed with the Florida Dept. of	State)
(Document number of corporation (if known)	
	n 646 - 4
ursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> dopts the following amendment(s) to its Articles of Incorporation:	Proju Corporation
EW CORPORATE NAME (if changing):	
Green My City, Inc.	
Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Confessional corporation must contain the word "chartered", "professional association," or	
	"1
nd/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)	ate Afficie-sum (s)
1/A	HASS -
	Total
	100 - 100 to
(Attach additional pages if necessary)	
an amendment provides for exchange, reclassification, or cancellation of is in implementing the amendment if not contained in the amendment itself: (if	ssued shares, provisions f not applicable, indicate N/A)

(continued)

The date of each amendment(s) adoption: February 12, 2008
Effective date if applicable: April 1, 2008
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved 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.
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)
Or. Marla LaVoice (Typed or printed name of person signing)
President/Owner
(Title of person signing)

FILING FEE: \$35