

F02000004436

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

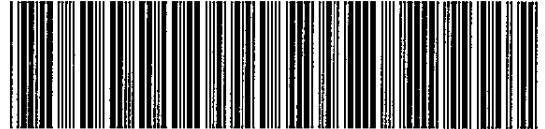
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300063857173

01/17/06--01028--003 **43.75

FILED

06 JAN 17 PM 4:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1/18/06 N.C.

SCHNEIDER WEINBERGER & BEILLY LLP

Attorneys-at-Law

2200 Corporate Boulevard, N.W., Suite 210
Boca Raton, Florida 33431-7307

James M. Schneider, P.A.
Steven I. Weinberger, P.A.
Roxanne K. Beilly, P.A.

January 12, 2006

Telephone
(561) 362-9595
Facsimile
(561) 362-9612

VIA FEDERAL EXPRESS

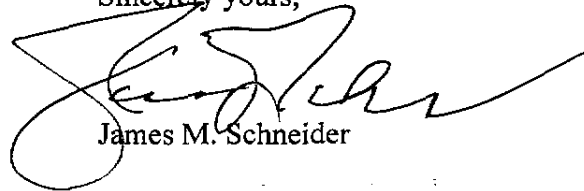
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, Florida 32301

Re: IHealth Inc.
Document No. F02000004436

Dear Sir or Madam:

Enclosed on behalf of our client is the completed and executed Amendment to Application for Authorization to Transact Business in Florida, along with a check made payable to the Florida Department of State to cover the filing fees and a certified copy of the Amendment. Should you have any questions, kindly contact the undersigned.

Sincerely yours,



James M. Schneider

JMS:sjm
Enclosures

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: IHEALTH INC.

(Name of Corporation)

DOCUMENT NUMBER: F02000004436

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

BRIAN S. JOHN

(Name of Contact Person)

TEEKA TAN PRODUCTS, INC.

(Firm/Company)

5499 N. FEDERAL HWY., SUITE D

(Address)

BOCA RATON, FL 33487

(City/State and Zip Code)

For further information concerning this matter, please call:

BRIAN S. JOHN

(Name of Contact Person)

at (561) 989-3600

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐

\$35.00 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)

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

PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO
APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

F02000004436

(Document number of corporation (if known))

1. IHEALTH INC.

(Name of corporation as it appears on the records of the Department of State)

2. DELAWARE

(Incorporated under laws of)

3. 08/28/2002

(Date authorized to do business in Florida)

FILED
06 JAN 17 PM 4:17
CLERK OF STATE
TALLAHASSEE, FLORIDA

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? DECEMBER 16, 2005

5. TEEKA TAN PRODUCTS, INC.

(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)


(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)


(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

RICHARD MILLER

(Typed or printed name of person signing)

DIRECTOR

(Title of person signing)