L34575

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	•
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nam	ne).
(Do	ocument Number)	···
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		•
		•
		•
. •		

Office Use Only



700182814707

07/06/10--01031--016 **35.00

SECRETARY OF STATE

到的

Melson Contraction of the contra

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORE	PORATION: Natural Medicine Center, Inc		
DOCUMENT NU	MBER:	L34575	
The enclosed Artic	eles of Amendment and fee	are submitted for filing.	.
Please return all co	orrespondence concerning th	is matter to the following:	
		homas A. Rofrano	
	ľ	Name of Contact Person	
in a superior	::Natur	al Medicine Center, Inc	
- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		Firm/ Company	
	985	0 Alt. A1A, Suite 509	
		Address	
•			
•	···	each Gardens, FL 33410	
	C	City/ State and Zip Code	
	trofrar	no@bellsouth.net ed for future annual report notification)	
*		of the second	
P - C - 41 1 - E	-4		•
For further inform	ation concerning this matter	, please call:	a ·
Th	omas A. Rofrano	at (561) 627	-5816
	of Contact Person	Area Code & Daytime Teleph	
		made payable to the Florida Departme	ent of State:
	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
P.O. Box 6	nt Section f Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	
		Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation of

Ar	ticles of Ame	endment	1	A Committee of the Comm
	to	49		ed e
Arti	icles of Incor of	poration		
· · · · · · · · · · · · · · · · · · ·			1	Jun Master
Natural Medic			-£94-4-0)	
. (Name of Corporation as currently	-	е втогна рерг. (or State)	4. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
	4575	/'C1		
(Document Number	of Corporation	n (ii known)		1030x
Pursuant to the provisions of section 607.1006, F amendment(s) to its Articles of Incorporation:	lorida Statutes	s, this <i>Florida Pi</i>	rofit Corporation	adopts the following
A. If amending name, enter the new name of the	e corporation:	Ė	:	
Natural Med			<u>:</u>	The new
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the des name must contain the word "chartered," "profess	signation "Cor	rp," "Inc," or "C	co". A professio	orated" or the nal corporation
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A	DDRESS)	2401 PGA Biv Palm Beach G		410-35 1
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		2401 PGA Blvo Palm Beach G	1	 <u>110-3</u> 515
D. If amending the registered agent and/or regi- new registered agent and/or the new register			a, enter the nam	e of the
Name of New Registered Agent:			į	
The state of the s			1 :	
New Registered Office Address:	(Florid	la street address)	·	
New Registered Office Address: (Florida street address)				
	(Cit.)		, Florida_	
	(City)		(Zip Code)	•
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agent			ot the obligations	of the position.
•				
Sian	ature of New I	Repistered Ageni	if changing	

Page 1 of 3

removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary) Type of Action **Title** <u>Address</u> Name | ☐ Add ☐ Remove ☐ Add ☐ Remove ☐ Add Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) 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)

If amending the Officers and/or Directors, enter the title and name of each officer/director being

The date of each amendmen	(s) adoption: 7-12-10	š
Effective date if applicable:	7-12-10 (date of adoption is req	quired)
· · ·	(no more than 90 days after amendment f	île date) :
· · *		!
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
	re adopted by the shareholders. The number sufficient for approval.	er of votes cast for the amendment(s)
	re approved-by-the shareholders through ve ed for each voting group entitled to vote sep	
"The number of votes	cast for the amendment(s) was/were suffic	ient for approval
by	_	3)
-/ _	(voting group)	•
The amendment(s) was/we action was not required.	ere adopted by the board of directors withou	at shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without sha	areholder action and shareholder
Dated_ 7-1-	10	
Signature _	- Mue	
sel	y a director, president or other officer – if dected, by an incorporator – if in the hands opinted fiduciary by that fiduciary)	
	Thomas A Rofra	ano ; = = = = = = = = = = = = = = = = = =
31 - E.	(Typed or printed name of pe	erson signing)
	Presipe	nt
	(Title of person signing)	