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PICK-UP	MAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	
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SECRETARY OF STATE WILL AHASSEE, FLORIDA

NC News 2-18-11

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: STOP THE SPREAD, INC.					
DOCUMENT NUMB	ER: N06000008860				
The enclosed Articles	of Amendment and fee are subm	itted for	r filing.		
Please return all corres	pondence concerning this matter	to the	following	; ;	
		Morga			
	(Name of C	ontact F	Person)		
	Stop The	Sprea	d, Inc.		
	(Firm/	Compar	ıy)		
	72 E McNat	Rd, P	MB 174	1	
-	(Ac	ldress)			
	Pompano Be	each, F	L 3306	0	
	(City/ State	and Zip	Code)		
	marymorgan	@bells	outh.ne	et	
	E-mail address: (to be used	for futu	re annual	report notificat	ion)
For further information	concerning this matter, please of	all:			
Mary Morgan		at (954	942-1133	
(Name o	f Contact Person)		(Area C	Code & Daytime	e Telephone Number)
Enclosed is a check for	the following amount made pay	able to	the Floric	da Department o	of State:
	☐ \$43.75 Filing Fee & Certificate of Status	Certif	3.75 Filin fied Copy tional copsed)	,	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	z Address ment Section			Address Iment Section	
Division of Corporations		Division of Corporations			
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

FILED

STOP THE SPREAD, INC.

2011 FEB 17 A 8: 25

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

N06000008860

SECRETARY OF STATE TALLAHASSEE, FLORIDA

(Document Number of Corporation (if known)

A. If amending name, enter the new name of th					
Life Restoration Partners International, Inc.					
The new name must be distinguishable and conto abbreviation "Corp." or "Inc." <u>"Company" or "</u> (
B. Enter new principal office address, if applica					
(Principal office address <u>MUST BE A STREET A</u>	ADDRESS)				
		<u> </u>			

C. Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE	BOX)				
). If amending the registered agent and/or regi	stered office address in Florida	enter the name of th			
D. If amending the registered agent and/or reging new registered agent and/or the new register		, enter the name of th			
new registered agent and/or the new register		, enter the name of th			
		, enter the name of th			
new registered agent and/or the new register Name of New Registered Agent:	red office address:	, enter the name of th			
new registered agent and/or the new register		, enter the name of th			
new registered agent and/or the new register Name of New Registered Agent:	ed office address: (Florida street address)	, Florida			
Name of New Registered Agent:	red office address:				
new registered agent and/or the new register Name of New Registered Agent:	(Florida street address)	, Florida			

Signature of New Registered Agent, if changing

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) Address **Type of Action** <u>Title</u> <u>Name</u> _ 🗀 Add ☐ Remove ☐ Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

The date of each amendment(s)	adoption: 1/1/2011
.,	(date of adoption is required)
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were a was/were sufficient for approv	adopted by the members and the number of votes cast for the amendment(s) val.
There are no members or men adopted by the board of direct	mbers entitled to vote on the amendment(s). The amendment(s) was/were tors.
Dated_1/1/20	11
Signature	Mary Morgan
have n	e chairman or vice chairman of the board, president or other officer-if directors of been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)
	Mary Morgan
-	(Typed or printed name of person signing)
_	Treasurer
	(Title of person signing)

Page 3 of 3