# N10000008118

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ddre <b>ss</b> )	
(Ci	ty/State/Zip/Phone	<b>→ #</b> )
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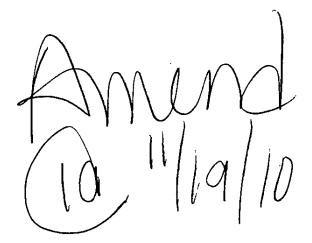
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SECRETARY OF STATE TALLAHASSEE FEORIDI



#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CO	RPORATION: Never Quit Living	g Life Corp.	
DOCUMENT N	NUMBER: N1000008118	· · · · · · · · · · · · · · · · · · ·	
The enclosed Ar	rticles of Amendment and fee are submit	ted for filing.	
Please return all	correspondence concerning this matter t	to the following:	
-	· ·-	Petroni	
	(Name of Co.	ntact Person)	
	Never Quit	Living Life	
_	(Firm/ Co	ompany)	
_	1015 Atlantic	Blvd., #888	
_	(Add	ress)	
	Atlantic Beach,	Florida 32233	
-	(City/ State a	nd Zip Code)	<del></del>
		hotmail.com	
	E-mail address: (to be used for	or future annual report notification	n)
For further infor	mation concerning this matter, please ca	11:	
Erik Petroni	•	at ( 904 ) 887-9595	
(1)	lame of Contact Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a che	eck for the following amount made paya	ble to the Florida Department of	State:
<b>☑</b> \$35 Filing Fe	e	☐ \$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	Street Address Amendment Section Division of Corporations Clifton Building	is enclosed)

2661 Executive Center Circle

Tallahassee, FL 32301

#### **Articles of Amendment Articles of Incorporation** of

### Never Quit Living Life Corp. (Name of Corporation as currently filed with the Florida Dept. of State) N10000008118

(Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Fl the following amendment(s) to its Articles of Inco		r Profit Corporation a
A. If amending name, enter the new name of the	he corporation:	
The new name must be distinguishable and con abbreviation "Corp." or "Inc." "Company" or "		
B. Enter new principal office address, if applic (Principal office address <u>MUST BE A STREET</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<i>BOX</i> )	
D. If amending the registered agent and/or reg new registered agent and/or the new register		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
	(City)	, Florida (Zip Code)
	()/	(24)

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

## 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
	<del></del>		
<del></del>			
<del></del>			
Article VI	Never Quit Living Life Corp.	e specific) is organized exclusively fo	
	al, and, and scientific purpose		
	ns to organizations that qualif		
of the inte	rnal Revenue Code, or corres	ponding section of any fut	ure federal tax code.
Article VII	- Upon the dissolution of the d	organization, assets shall b	e distributed for one or
more exer	npt purposes within the mean	ing of section 501(c)(3) of	the Internal Revenue
code, or co	orresponding section of any fu	uture federal tax code, or s	hall be distributed to the
federal go	vernment, or to a state or loca	al government, for a public	purpose. Any such
assets not	disposed of shall be dispose	d of by the Court of Comm	on Pleas of the county in
which the	principal office of the organiza	ation is then located, exclu	sively for such purposes
	organization or organizations		
organized	and operated exclusively for	such purposes.	<u> </u>
<del></del>	·		
		· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) a	adoption: November 16, 2010
	(date of adoption is required)
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ac was/were sufficient for approva	dopted by the members and the number of votes cast for the amendment(s) l.
There are no members or mem adopted by the board of directors.	bers entitled to vote on the amendment(s). The amendment(s) was/were ors.
have no	chairman or vice chairman of the board, president or other officer-if directors to been selected, by an incorporator – if in the hands of a receiver, trustee, or our appointed fiduciary by that fiduciary)
	Erik Petroni
	(Typed or printed name of person signing)
	President
	(Title of person signing)