N1000001310

(Re	questor's Name)	
(Ad	dress)	
· (Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
,		

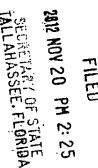
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ROR 11 (26/12

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Studio B A	RT-FULL-LI	VING, INC.
DOCUMENT NUMBER: N110000013	310	
The enclosed Articles of Amendment and fee are subm		
Please return all correspondence concerning this matter	to the following:	
Aaron A. White		
(Name of Contact Person)	
Dunlap & Shipman, P.A.		
	(Firm/ Company)	
60 Clayton Lane, Suite A		
(Address)		
Santa Rosa Beach, FL 3	2459	
(City/ State and Zip Code)		
aaron@dunlapshi	•	
E-mail address: (to be used	·	ification)
For further information concerning this matter, please		
Charlotte Floyd	at (850)	231-3315
(Name of Contact Person)		& Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Departs	ment of State:
☐ \$35 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 Tallahassec, Fl. 32314	Division Clifton B 2661 Exe	ent Section of Corporations

Articles of Amendment Articles of Incorporation

FILED

Studio B ART-FULL-LIVING, INC.

2012 NOV 20 PH 2: 25

(Name of Corporation as currently filed with the Florida Dept. of State) N11000001310

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Document Number of Corporation (if known)

amendment(s) to its Articles of Incorporation				
A. If amending name, enter the new nam	ne of the corporation:			
name must be distinguishable and contain "Company" or "Co." may not be used in	the word "corporation" or "incorporated" of the name.	r the abbre		new nc."
B. Enter new principal office address, if (Principal office address <u>MUST BE A ST</u>				
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O				
D. If amending the registered agent and new registered agent and/or the new	lor registered office address in Florida, ent	ter the nan	ne of the	
Name of New Registered Agent:	Dunlap & Shipman, P.A.			
	60 Clayton Lane, Suite A		•	
New Registered Office Address:	(Florida street address)	•		
	Santa Rosa Beaech	, Florida	32459	
	(City)	(Zip C	'ode)	
New Registered Agent's Signature, if ch I hereby accept the appointment as registe	nanging Registered Agent: ered agent. I am familiar with and accept the	e obligation	s of the position.	
Sign	nature of New Registered Agons, if changing		-	

Page 1 of 4

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)

Please note the officer'director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change. Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X_Change X_Remove X_Add	PT John I V Mike . SV Sally S	<u>lones</u>	52m; 7:
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change Add Remove			
2) Change Add			
Remove 3) Change Add			
Remove 4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

Article IX	
Upon the dissolution of this organization, assets shall be distributed for one or more	
exempt purposes within the meaning of section 501(c)(3) of the	
Internal Revenue Code, or corresponding section of any future	
federal tax code, or shall be distributed to the federal government,	
or to a state or local government, for a public purpose.	

The date of each amendment(s) adoption:
Effective date if applicable: 1///3//2
(no more/than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the members and the number of votes east for the amendment(s) was/were sufficient for approval.
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated 11 (13 12 Signature COO 00 D1
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Colleen Duffley
(Typed or printed name of person signing)
President
(Title of person signing)