N1200000125

| (Requestor's Name) |
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| (Address) |
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| (Address) |
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| (City/State/Zip/Phone #) |
| |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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MAY '8 2012 C. MUSTAIR

COVER LETTER

TO: Amendment Section
Division of Corporations

| NAME OF CORPORATION: Almond E | Blossom We | ellness, INC | |
|----------------------------------------------------------------------------------|-------------------------------------------------------------------|----------------------------------------------------------------------------------------|--|
| DOCUMENT NUMBER: N1200000 | 125 | | |
| The enclosed Articles of Amendment and fee are sub | | | |
| Please return all correspondence concerning this matter | er to the following: | | |
| Kim Hostetter | | | |
| | (Name of Contact Perso | n) | |
| Almond Blossom Wellne | ss, INC | | |
| | (Firm/ Company) | | |
| 205 Dogwood Trail | | | |
| | (Address) | | |
| Lake Lure, NC 28746 | | | |
| | (City/ State and Zip Cod | e) | |
| kimalmondblosso | mlive@ama | ail.com | |
| E-mail address: (to be used | | | |
| For further information concerning this matter, please | call: | | |
| Kim Hostetter | _{at} 954 | 478-5286 ode & Daytime Telephone Number) | |
| (Name of Contact Person) | (Area Co | ode & Daytime Telephone Number) | |
| Enclosed is a check for the following amount made pa | yable to the Florida Depa | artment of State: | |
| \$35 Filing Fee \$\Bar{\textbf{\beta}}\$43.73 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 | | Address | |
| Amendment Section Division of Corporations | Amendment Section Division of Corporations | | |

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

| Almond Blossom Wellness, INC |
|--------------------------------------------------------------------------|
| (Name of Corporation as currently filed with the Florida Dept. of State) |
| N1200000125 |
| |

(Document Number of Corporation (if known)

| | me of the corporati | on: | | F " |
|-----------------------------------------------------------------------------------------|---------------------|---------------------------|--------------------|----------------------------------------|
| n/a | | | | The nev |
| ame must be distinguishable and contain Company" or "Co." may not be used in | | ion" or "incorporated" or | the abbreviation " | Corp." of "Inc." |
| B. Enter new principal office address, i | f annlicable: | n/a | | |
| (Principal office address MUST BE A STREET ADDRESS | | | | <u> </u> |
| | | | | PH 2 |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | 205 Dogwood T | rail 🤌 | ************************************** |
| | | Lake Lure, NC 2 | 28746 | |
| | | | | |
| | | | | |
| . If amending the registered agent and | | | the name of the | |
| new registered agent and/or the new | registered office a | ddress: | | |
| Name of New Registered Agent: | n/a | | | |
| | n/a | | | |
| | | Florida street address) | | |
| New Registered Office Address: | | | | |
| | n/a | | . Florida | |
| | | | (Zip Code) | |

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)

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.

| X Change | <u>PT</u> | John Doe | |
|-------------------------------|--------------|-------------|-----------------|
| X Remove | <u>v</u> | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change Add Remove | n/a | r/a | |
| 2) Change Add Remove | n∕a | n/a | |
| 3) Change Add Remove | n/a | n/a | |
| 4) Change Add Remove | n/a | <u>n∕a</u> | |
| 5) Change Add Remove | n/a | rvia | |
| 6) Change Add Remove | n/a | <u>n/a</u> | |

| (attach additional sheets, if necessary). (Be specific) | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Attaching one page of Articles of Incorporation | n for Almond Biossom Wellness, INC for the purpose | |
| of forming a Non-Profit Corporation under the | Non-Profit Corporation Law of Chapter 617.0202, F.S. as required by the IRS | |
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Articles of Incorporation of Almond Blossom Wellness, INC

The undersigned, a majority of whom are citizens of the United States, desiring to form a Non-Profit Corporation under the Non-Profit Corporation Law of Chapter 617.0202, F.S. do hereby certify:

First: The name of the Corporation shall be Almond Blossom Wellness, INC.

Second: The place in this state where the principal office of the Corporation is to be located is the City of Flagler Beach, Flagler County.

Third: Said corporation is organized exclusively for charitable, religious, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

Fourth: No part of the net earnings of the corporation shall inure to the benefit of, or be distributable to its members, trustees, officers, or other private persons, except that the corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in Article Third hereof. No substantial part of the activities of the corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the corporation shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of or in opposition to any candidate for public office. Notwithstanding any other provision of these articles, the corporation shall not carry on any other activities not permitted to be carried on (a) by a corporation exempt from federal income tax under section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or (b) by a corporation, contributions to which are deductible under section 170(c)(2) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

If reference to federal law in articles of incorporation imposes a limitation that is invalid in your state, you may wish to substitute the following for the last sentence of the preceding paragraph: "Notwithstanding any other provision of these articles, this corporation shall not, except to an insubstantial degree, engage in any activities or exercise any powers that are not in furtherance of the purposes of this corporation."

Fifth: Upon the dissolution of the corporation, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or the 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. Any such assets not so disposed of shall be disposed of by a Court of Competent Jurisdiction of the county in which the principal office of the corporation is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

In witness whereof, I have hereunto subscribed my name, this 30th day of April, 2012.

Kim Hostetter, President

| The date of each amendment(s | April 30, 2012 |
|------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 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/wer was/were sufficient for app | re adopted by the members and the number of votes cast for the amendment(s) roval. |
| There are no members or madopted by the board of dia | nembers entitled to vote on the amendment(s). The amendment(s) was/were rectors. |
| Dated April | 30, 2012 |
| Signature | m tosteter |
| have no | hairman or vice chairman of the board, president or other officer-if directors t been selected, by an incorporator – if in the hands of a receiver, trustee, or ourt appointed fiduciary by that fiduciary) |
| Kim Hos | tetter |
| *************************************** | (Typed or printed name of person signing) |
| Presider | nt |
| | (Title of person signing) |