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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: <u>a Zul for Better L</u>	iving, Inc.
	J
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following	:
Sandra Rad (Name of Contact	Faelli
(Name of Contac	t Person)
a Zul For Bet	ter Living, Inc.
(Firm/ Comp	oany)
2635 Old O	Keechobee Rd
(Address)
West Palm Beach, (City/ State and 2	FL 33409
(City/ State and 2	Cip Code)
E-mail address: (to be used for future annual	avt design org
For further information concerning this matter, please call:	
^	
Sandra Raffaelli augs	54) 600 5330 Area Code & Daytime Telephone Number)
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florid	da Department of State;
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing I Certificate of Status	Certificate of Status
Mailing Address	Street Address
Amendment Section	Amendment 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

	ing, Inc				
(Name of Corporation as currently	filed with the Flori	da Dept. of State)			
(Docu	ment Number of Corp	poration (if known)			
Pursuant to the provisions of section 617.10 amendment(s) to its Articles of Incorporation		this Florida Not F	or Profit Corporatio	on adopts the f	ollowing
A. If amending name, enter the new nan	ne of the corporatio	<u>n:</u>			
a Zul - Fashion, ait & de name must be distinguishable and contain "Company" or "Co." may not be used in t	the¥vord "corporatio	on" or "incorporate	ed" or the abbreviat	ion "Corp." o	The new
B. Enter new principal office address, if (Principal office address <u>MUST BE A ST</u>					
C. Enter new mailing address, if application (Mailing address MAY BE A POST O.)					
D. If amending the registered agent and new registered agent and/or the new			a, enter the name o	21 APR	-17
Name of New Registered Agent:				172	
New Registered Office Address:	(F	lorida street addressi		PR 3: 3 FEDRIDA	
	(City)	<u></u>	Florida	(Zip Code)	
New Registered Agent's Signature, if char I hereby accept the appointment as register			ot the obligations of	the position.	
	Signature of New R	egistered 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.

Example: X Change X Remove X Add	PT John I V Mike . SV Sally S	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add Remove	D	Gino D'Angelo Rodrigue Z	S600 N flagger Dr apt 1510 West Palm Beach, Fl 3340:
2) Change Add	<u>D</u>	Maria Garcia Rampaña	S600 N. flagler Dr WPB FL. 33407
Remove 3) Change Add			
Remove 4) Change			
Add			
5) Change Add Remove			
6) Change Add			
Remove			

utach additional sheets, if necessary).	icles, enter ch: (Be specific)					
						
						
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	date of each amendment(s) adoption: $2 - 27 - 2021$ this document was signed.	, if other than the
	(no more than 90 days after amendment file date)	
Ado	option of Amendment(s) (<u>CHECK ONE</u>)	
Ø	The amendment(s) was/were adopted by the members and the number of votes cast 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 April. 1. 2021	
	Signature(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)	
	David Raffaell	
	(Typed or printed name of person signing)	
	(Title of person signing)	
	(Title of person signing)	