NZO 00000 3631

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Amend

JUN 23 2020 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

LOTUS HEALING NAME OF CORPORATION:	CENTERS, INC.		
N2000003631 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub-	omitted for filing.		
Please return all correspondence concerning this mat	ter to the following:		
Regina Rabitaille, Esq.			
	(Name of Contact Pe	erson)	
Nelson Mullins Riley & Scarborough			
	(Firm/ Company	·')	
390 N. Orange Ave., Ste. 1400			
	(Address)		
Orlando, Florida 32801			
	(City/ State and Zip	Code)	
regina.rabitaille@nelsonmullins.com			
E-mail address: (to be use	d for future annual rep	ort notification	1)
For further information concerning this matter, pleas	e call:		
Regina Rabitaille, Esq.	at	407	839-4209
(Name of Contact Person		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida	Department of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certif s Certif) Filing Fee icate of Status ied Copy tional Copy is ised)
Mailing Address Amendment Section	An	rect Address	
Division of Corporations	Di	rision of Corpo	prations

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

LOTUS HEALING CENTERS, INC.

(Name of Corporation as currently filed with the Florida	Dept. of State)		
N20000003631			
(Document Numb	er of Corporation (if k	nown)	
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not Fe</i>	or Profit Corporation adopts the	: following
A. If amending name, enter the new name of the corporat	ion:		
			_The new
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporated	d" or the abbreviation "Corp."	or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
			7020
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		-	(-: (-:
			۲,
			PH
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office:		, enter the name of the	-5 PH 2: 22
Name of New Registered Agent:			
New Registered Office Address:	(F	lorida street address)	
New Registered Office Mairess.			
	(City)	, Florida (Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	Agent:	. ,	
S	onature of New Revisi	tered 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 Do V Mike Jo SV Sally Sr	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	D	Dale Budha	390 N. Orange Ave., Ste. 1400 Orlando, Florida 32801
X Remove			- ,
2) Change Add	D	Terrence Diaz	390 N. Orange Ave., Stc. 1400 Orlando, Florida 32801
Remove Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee	g additional Arti	cles, enter change(s) here: (Be specific)	

		-
		
	•	
		··
The date of each amendment(s) adoption:late this document was signed.	5 26 2020	, if other than the
Effective date if applicable:	re than 90 days after amendment file date)	
(no mor	e man 20 days after amenament file ante)	
Note: If the date inserted in this block does not m	eet the applicable statutory filing requireme	nts, this date will not be listed as the

Adoption of Amendment(s) (CHECK ONE)

document's effective date on the Department of State's records.



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 05/2-6/2020		
	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)		
	Michael Radku		
	(Typed or printed name of person signing)		
	President		

(Title of person signing)