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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: Essential Energy Spa & Mystical Center, he

DOCUMENT NUMBER: N 22 0000 10 611

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Hannah (Name of Contact Person) Essential Energy Spa (Firm/Company) US 1 South Blog 200, Ste 202 ST. Augustine, FL 32086 (City/State and Zip Code) espancegnail. Lon E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Hannah Wyman at 561 246-2830 (Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

🗹 \$35 Filing Fee	□\$43.75 Filing Fee &	🗆 \$43.75 Filing Fee &	□\$52.50 Filing Fee
	Certificate of Status	Certified Copy	Certificate of Status
		(Additional copy is	Certified Copy
		enclosed)	(Additional Copy is
			Enclosed)

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

Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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Articles of Amendment to Articles of Incorporation of ESSENTIAL ENERGY Spa & Mystical Center, Inc (Name of Corporation as currently filed with the Florida Dept. of State)		1.3 1.3 81 7.00 43
N 22000010611		г\) Г\)
(Document Number of Corporation (if known)		-
Pursuant to the provisions of section 617,1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the amendment(s) to its Articles of Incorporation: A. <u>If amending name, enter the new name of the corporation:</u> <u>Energy Heating</u> Foundation, Inc. name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp. <u>"Company" or "Co." may not be used in the name</u> .		-
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		-
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		_

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:	Hannah	Wym.	an
	87 Granite	Ave	
		(Florida street a	(ddress)
<u>New Registered Office Address:</u>			
	St. August	ne	Florida 32.086
	(City)		(Zip Code)

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

, I

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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add		Doe Jones Smith	
<u>Type of Action</u> (Check One)	Title	Name	Address
1) Change Add	TSD	Reid Hale	56 Green Palm Ct St Augustine, FL 32086
Remove Change Add		Ryan Bishop	13005 Southern Blud site 225 Loxabetchee, FL 33470
Remove 3) Change Add Remove	<u> </u>	Hannah Wyman	87 Granile Ave St. Augustine, FL 32086
4) <u>></u> Change Add		Sheila Bachar	87 Granile Ave Bl. Augustine, FL 32,086
Remove 5) Change Add	<u> S </u>	Laura Ahearn	407 Ashby Landing Way St. Augustine, FL 32086
Change Add			
Remove		rticles onter change(s) have	

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

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The date of each amond mant(s) adoption:	والمراجع والمراجع المراجع
The date of each amendment(s) adoption:	, it other than the
and and accument was signed.	
Effective date if applicable:	
Effective date <u>if applicable</u> :	

<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

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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.

6/12/24 Dated e <u>Harl</u> <u>Wyn-President</u> (By the chairman or vice chairman of the board, president or other officer-if directors Signature 🦾

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(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)

Hanah Wyman (Typed or printed name of person signing)

President (Title of person signing)

ALL IN SECURICES