# P.00000110979

(Requ	estor's Name)	
(Addre	∍ss)	
(Addre	ess)	
(City/S	State/Zip/Phon	e #)
PICK-UP	<b>WAIT</b>	MAIL
(Busin	ness Entity Nar	ne)
(Доси	ment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fili	ing Officer:	
		}

Office Use Only



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SECRETARY OF STATE

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### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 12, 2005

BE WELL HOMEOPATHICS, INC. % RICHARD CLEMENT 11459 NW 34TH ST. MIAMI, FL 33178

SUBJECT: BE WELL HOMEOPATHICS, INC.

Ref. Number: P00000110979

We have received your document for BE WELL HOMEOPATHICS, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6908.

Anna Chesnut Document Specialist

Letter Number: 905A00056247

05 SEP 19 AH 8: 00

ILUSION OF CONFIDENCE

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Be Well	Homeopathics, INC.
DOCUMENT NUMBER:	81048
The enclosed Articles of Amendment and fee are s	submitted for filing.
Please return all correspondence concerning this m	atter to the following:
Richard Name of C	T. Clement ontact Person)
Be Well Hom	eopathics, INC.
11459 NW 3	4th Street
Miami, FL (City/State	33172 and Zip Code)
For further information concerning this matter, ple	ase call:
Richard Clement (Name of Contact Person)	_at (305) <u>594-2145</u> (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
S35 Filing Fee Scertificate of Status  Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed)  S3.75 Filing Fee Certificate of Status Certified Copy (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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

# Be Well Homeopathics Inc. 11459 NW 34 Street

Miami, FL 33178 1-877-438-3042

www.web-outpatients.com

9/7/2005

Division of Corporation: 850-245-6897

Be Well Homeopathics FEI 651058648

Hello,

Please change our address from 2441 NW 93 rd Av. Miami FL 33172 To 11459 NW 34 Street Miami, FL 33178

Same new address for Directors and Registered Agent

Sincerely,

Richard Clement

### Articles of Amendment to Articles of Incorporation of

· · · · · · · · · · · · · · · · · · ·	500
Be Well Homeopathics, INC.	FR 2 32
(Name of corporation as currently filed with the Florida Dept. of State)	10.
45-1058648 Paggood/10979	\$55
(Document number of corporation (if known)	<del>_</del>
ursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Co</i> dopts the following amendment(s) to its Articles of Incorporation:  EW CORPORATE NAME (if changing):	orporation
Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc., professional corporation must contain the word "chartered", "professional association," or the abbre	" or "Co.") viation "P.A.")
MENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Articled and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)	e Number(s)
Be Well Homeopathics, INC (165-10581048)	
~address change~	<u></u>
to new address:	
11459 NW 34th St.	
Miami, FL 33178	
Directors & R.A.	
DIFECTORS & R.H.	
(Attach additional pages if necessary)	
fan amendment provides for exchange, reclassification, or cancellation of issued sha or implementing the amendment if not contained in the amendment itself: (if not applic	
or implementing the amendment it not contained in the amendment users. (It not applied	able, mulcale 1477

(continued)

The date of each amendment(s) adoption: 91505
Effective date if applicable:
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval by
(voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Signature  (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
President (Title of person signing)

FILING FEE: \$35