PO1000112537

(Requ	estor's Name)	
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(City/S	State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
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Certified Copies	Certificate	s of Status
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DIVISION OF CORPORATIONS
28 PM 12: 10

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Natural Health	n Solutions, Inc.	<u> </u>
FEIN	DUC. ##	
DOCUMENT NUMBER: 59-3756625	PO1000112537	
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
James F. Casale		
(Name of	Contact Person)	
ChrisCarol Company		
(Firm	n/ Company)	
5039 New Savannah Circle		<u> </u>
(1	Address)	· ·
Wesley Chapel, FL 33544		<u>.</u>
(City/ Sta	te and Zip Code)	
For further information concerning this matter, p	lease call:	
James F. Casale	at (_813) 788-7887	
(Name of Contact Person)	(Area Code & Daytime Te	elephone Number)
Enclosed is a check for the following amount:		
☑ \$35 Filing Fee	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Statu Certificate Of Statu 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 Circ Tallahassee, FL 32301	le

DIVISION OF CORPORATIONS
2006 APR 28 PM 12: 10

Articles of Amendment to Articles of Incorporation of

Natural Health Solutions, Inc.	
(Name of corpo	oration as currently filed with the Florida Dept. of State)
FEIN	DOC #
59-3756625	10/000112737
(De	ocument number of corporation (if known)
Dursuant to the provisions of section	on 607.1006, Florida Statutes, this Florida Profit Corporation
idopts the following amendment(s)	
- ,	•
NEW CORPORATE NAME (if a	changing):
ChrisCarol Company	
	ompany," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
A protessional corporation must contain	the word "chartered", "professional association," or the abbreviation "P.A.")
AMENDMENTS ADOPTED- (O	OTHER THAN NAME CHANGE) Indicate Article Number(s)
	ded, added or deleted: (BE SPECIFIC)
N/A	
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	The state of the s
* <u>,1,,,,</u>	(Attach additional pages if necessary)
	7,
	nange, reclassification, or cancellation of issued shares, provision f not contained in the amendment itself: (if not applicable, indicate Na
N/A	
	

(continued)

The date of each amendme	nt(s) adoption: 4/24/06
Effective date if applicable:	4/24/06
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
) was/were approved by the shareholders. The number of votes cast for by the shareholders was/were sufficient for approval.
) was/were approved by the shareholders through voting groups. The nt must be separately provided for each voting group entitled to vote amendment(s):
"The number	of votes cast for the amendment(s) was/were sufficient for approval by
	(voting group)
) was/were adopted by the board of directors without shareholder action ction was not required.
) was/were adopted by the incorporators without shareholder action and was not required.
seto	a director, president or other officer - if directors or officers have not been exted, by an incorporator - if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
Ja	mes F. Casale
	(Typed or printed name of person signing)
Pr	esident
	(Title of person signing)

FILING FEE: \$35