## P02000032302

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: ROCKWELL NUTTITION, INC.
DOCUMENT NUMBER: P0200032302
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Annika Rockwell  Name of Contact Person  Rockwell Nytrition, Inc.  Firm/ Company  1700 Meridian Are #101  Address  Miani Beach FL 33139  City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Annika Rockwell at (305) 534-1399  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 Certificate of Status  Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

to

•	of	poration	1 .	
Rockwell Nutrition			<b>12</b>	
(Name of Corporation as currently		ida Dept, of State)	TAN THE	
P0200003230	7		5 To 1	T E
(Document Number o		nown)		7
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	da Statutes, this <i>Flo</i>	orida Profit Corporation adop	ts the following mend	ر lment(s)
A. If amending name, enter the new name of the o	corporation:			•
ROCKWELL FFKH,	Inc.		The n	
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	p," "Inc," or "Co	". A professional corporatio	ed" or the abbreviat n name must contain	ion the
B. Enter new principal office address, if applicable	le:	1700 Meridia	1 Ave # 101	
(Principal office address <u>MUST BE A STREET AD</u>		Miami Beach	FL 33130	1
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE Be	<u>OX</u> )	1700 Meridia		
		Miami Beach	FL 33139	
D. If amending the registered agent and/or registered new registered agent and/or the new registered  Name of New Registered Agent		in Florida, enter the name o	of the	
<del></del>	(Florida street	address)		
New Registered Office Address:		, Florida		
-	(City)		(Zip Code)	
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.		and accept the obligations of	the position.	
Signature of N	lew Registered Age	nt, 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)

Evample.

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 <math>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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove			
2) Change Add Remove			
3 ) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

If amending or adding additional Artic attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
	3. That Ti
If an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
<del> </del>	

The date of each amendment(s) ac	loption:
Effective date <u>if applicable</u> :	<u>'</u>
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado by the shareholders was/were sur	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	roved by the shareholders through voting groups. The following statement 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)
	(voting group)
action was not required.	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder
Dated 2/6/	12012
Signature (	Ux llll
(By a di	rector, president or other officer - if directors or officers have not been
	l, by an incorporator - if in the hands of a receiver, trustee, or other court
appoint	ed fiduciary by that fiduciary)
	Annika Rockwell
•	(Typed or printed name of person signing)
	President
•	(Title of person signing)