P0200006957

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Certified Copies	Cortificato	s of Status
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Special Instructions to Fi	ling Officer:	
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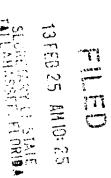
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800244608938

02/25/13--01049--015 **35.00

Amend



FEB 2 3 7013

1.1.

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Therapeutic Potentials, Inc. DOCUMENT NUMBER: P02000066957 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Raphael Colombo Name of Contact Person Therapeutic Potentials, Inc. Firm/ Company 6977 Professional Parkway East Address Sarasota, FL 34240 City/ State and Zip Code RColombo@TPIKids.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (941) 758-3140 Area Code & Daytime Telephone Number Raphael Colombo 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

Mailing Address

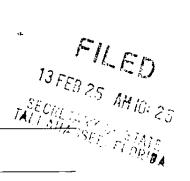
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

is enclosed)

Articles of Amendment Articles of Incorporation of



Therapeutic Potentials, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P02000066957

(Document Number of Corporation (if known)

mendment(s) to

A. If amending name, enter the new name of the corporati	The
name must be distinguishable and contain the word "corp." "Inc.," or Co" or the designation "Corp." "Inc, word "chartered," "professional association," or the abbrevia	," or "Co". A professional corporation name must conta
B. Enter new principal office address, if applicable:	Therapeutic Potentials, Inc.
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	6977 Professional Parkway East
	Sarasota, FL 34240
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Therapeutic Potentials, Inc.
	6977 Professional Parkway East
	Sarasota, FL 34240
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a	address:
Name of New Registered Agent Raphael C.	Colombo, Jr.
name of new negative regent	ssional Parkway East
	<u> </u>
6977 Profes	orida street address)
6977 Profes	

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	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X_ Add	<u>sv</u>	Sally Smith	
Type of Action	Title	<u>Name</u>	<u>Addres</u> s
(Check One) 1) Change	D	Raphael C. Colombo, Sr.	14 Blackberry Lane
Add			Herrin, IL 62948
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

\ttach add	g or adding additional sheets, if no	ecessary). (Be s	specific)			
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f an amer	idment provides f	for an exchange,	reclassification	1, or cancellatio	n of issued shares	4
provision	s for implementing tapplicable, indic	ng the amendmei	nt if not contain	ned in the amen	<u>dment itself:</u>	
(1) 110	ғаррисаоле, так	ate N/A)				

				-		

The date of each amendment(s) ad	option: 02/20/2013
Effective date if applicable:	
-	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were ado by the shareholders was/were sul	pted by the shareholders. The number of votes east for the amendment(s) licient for approval.
☐ The amendment(s) was/were approvided for a must be separately provided for a	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 east t	or the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/were adoption was not required.	pted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopaction was not required.	pted by the incorporators without shareholder action and shareholder
Dated_02/20/2 Signature	Pahal Cloby for h
selected	rector, president or other officer – if directors or officers have not been , by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
_	Raphael C. Colombo, Jr.
	(Typed or printed name of person signing)
	President
-	(Title of govern gianing)