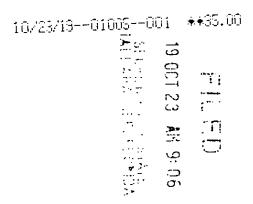
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORA	ATION: HEALTHY CORN	IER INC				
DOCUMENT NUMBI	P0200078108					
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.				
Please return all corresp	ondence concerning this ma	tter to the following:				
	MAR	IA NGELES PEREZ GU	RDIAN	(Manangeles	Perez	Gurdian)
_	<u> </u>	Name of Contact Persor	1			
	HEA	LTHY CORNER INC				
_	-	Firm/ Company			<del></del>	
	3001	SOUTH OCEAN DR APT	229			
_		Address			<del></del>	
	HOLI	YWOOD, FL 33019				
_		City/ State and Zip Code	e	-		
For further information	E-mail address: (to be us	783@ 9mcul. sed for future annual report	notification	)		
MARIANGELES PER	IEZ GURDIAN	786	773-94	18 ne Telephone Nur		
Name of Contact Person		Area Co	de & Daytit	ne Telephone Nur	nber	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of S	tate:		
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certific Certific	Filing Fee cate of Status ed Copy ional Copy osed)		
Amer Divis	ing Address indment Section ion of Corporations Box 6327	Amend Division	Address dment Section on of Corpo n Building			

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

of

## HEALTHY CORNER INC

(Name o	f Corporation as currently	filed with the	Florida Dept.	of State	<u>e</u> )		
	P02000078108						
	(Document Number of C	Corporation (i	f known)				
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006. Florida Statutes, this <i>Fl</i>	orida Profit (	Corporation ad	opts the	followi	ng amei	ndment(s)
A. If amending name, enter the new na	me of the corporation:						
						The	new
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "Co	o". A profes	" or "incorpo sional corpora	rated" o tion nan	or the c ne must	ibbrevi contai	ation n the
B. Enter new principal office address, Principal office address MUST BE A ST							
				_			_
C. Enter new mailing address, if appli							
(Mailing address <u>MAY BE A POST</u> )	<u>OFFICE BOX</u> )						
			<del></del> -		<u>'≥</u> ∵		
D. If amending the registered agent an	d/or registered office addre	ss in Florida,	enter the nam	e of the		)) ((	<b></b> .
new registered agent and/or the nev	MARIANGE LES	25052	(2. 10 D. A	<u>. 1</u>	1.5	-1 rs	
Name of New Registered Agent			GURDIA		<del></del>	_w 	
	3301 S. OCEAN DR APT 2			· · · · ·	• • •	_52	
	HOLLYWOOD	i (uuress)			33019	);; (2)	
New Registered Office Address:		City)		, Florida	(Zip	Code)	_
		•					
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agent:	th and accept	the obligation	s of the r	osition.		
nereny accept the appointment as regist	Alecce	m unu accepi	me miguion.	, cy me p	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
<u>-</u>	Signature of New Re	gistered Agen	t, 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)

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	PT	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) X Change	P	MARIANGELES PEREZ GUARDI/	3001 S. OCEAN DR APT 229
Add			HOLLYWOOD, FL 33019
Remove			
2) X Change	S	ANDY JAMES PAREDES GRAHAI	3001 S. OCEAN DR APT 229
Add			HOLLYWOOD, FL 33019
Remove			
3) Change	<del></del>		
Add			
Remove			19
4) Change			000
Add			
Remove			
5) Change			0.6
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)	
ARTICLE III: SHARES	
THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUTHORIZED TO HA	VE OUSTANDING
TO DATE THE SHARES ARE AS FOLLOWING:	
80 SHARES MARIANGELES PEREZ CORDIAN	
20 SHARES ANDY JAMES PAREDES GRAHAM	
	19
	9 007
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	7 23
(if not applicable, indicate N/A)	
	<u> </u>
	100 no

	10/18/2019	, if other than the
The date of each amendment late this document was signed	(3) 440 (7.01)	. It other than the
ate this document was signed	10/18/2019	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in document's effective date on t	this block does not meet the applicable statutory filing requirements, this he Department of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment of sufficient for approval.	ent(s)
☐ The amendment(s) was/we must be separately provide	re approved by the shareholders through voting groups. The following stated for each voting group entitled to vote separately on the amendment(s):	tement
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	<del></del> ;•	
<u>-</u>	(voting group)	
action was not required.	re adopted by the board of directors without shareholder action and shareholder action and shareholder adopted by the incorporators without shareholder action and shareholde	
Dated Signature <u>/</u> (I s	By a director president or other officer – if directors or officers have not be elected, by an incorporator – if in the hands of a receiver, trustee, or other ppointed fiduciary by that fiduciary)	
_	MARIANGELES PEREZ GURDIAN	
	(Typed or printed name of person signing)	<del></del>
	PRESIDENT	
	(Title of person signing)	<u> </u>