P03000007283

| (Requestor's Name) | | | | |
|---|--|--|--|--|
| (Address) | 800157226818 | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | 06/26/0901006020 **43.75 | | | |
| PICK-UP WAIT MAIL | | | | |
| (Business Entity.Name) | AND NAME AND FORCE OF THE PARTY | | | |
| (Document Number) | 99 JI SECR | | | |
| Certified Copies Certificates of Status | FILED 99 JUN 26 AM 9: 5 ECRETARY OF STATE LAHASSEE. FLORE | | | |
| Special Instructions to Filing Officer: | FLORIDA | | | |
| | | | | |
| | Anend | | | |
| Office Use Only | CCOULLIETTE | | | |

C.COULLIETTE JUN 29 2009

EXAMINER

COVER LETTER

TO: Amendment Section

| Division of Corporations | • | |
|--|---|---|
| NAME OF CORPORATION: Scientifi | c Nutrition Internat | ional Inc |
| DOCUMENT NUMBER: P030000 | 07283 | |
| The enclosed Articles of Amendment and fee are su | ubmitted for filing. | |
| Please return all correspondence concerning this ma | atter to the following: | |
| Galaxy P | Coman of Contact Person | · |
| * Name | of Contact Person | |
| Scient | ific Nutrition | |
| rı | till/ Company | |
| 7168 SW 47 | St. 2nd Floor | - |
| MIAMI, FL. Z | 53155 State and Zip Code | |
| ilavenutrition (a E-mail address: (to be used for | Indure annual report notification) | |
| For further information concerning this matter, plea | ase call: | |
| Galaxy Pomán Name of Contact Person | at (<u>305</u>) <u>667</u> Area Code & Daytime Tele | cphone Number |
| Enclosed is a check for the following amount made | payable to the Florida Depart | ment of State: |
| S35 Filing Fee S43.75.Filing Fee Certificate of Status | \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mailing Address | Street Address | |
| Amendment Section | Amendment Section | |
| Division of Corporations | Division of Corporations | |
| P.O. Box 6327 Tallahassee, FL 32314 | Clifton Building 2661 Executive Center Circle | _ |
| FAHADACCEE EL 47314 | - zpo i evecutive i enter i trete | . • |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation . of

| Scientific No. (Name of Corporation as current) | tritton ly filed with | Internation the Florida De | onal <u>Lne</u> | <u>e.</u> | | |
|--|--------------------------|---|-------------------|----------------------|-------------------|------------------------|
| P03000007 | | | | | | |
| (Document Number | r of Corpora | ition (if known) | | | | |
| Pursuant to the provisions of section 607.1006, Famendment(s) to its Articles of Incorporation: | Plorida Stati | utes, this <i>Florid</i> | a Profit Corpo | ration add | opts the | e following |
| A. If amending name, enter the new name of the | <u>e corporati</u> | on: | | | | |
| | | | | | The | new |
| name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the desname must contain the word "chartered," "profess | signation "C | Corp." "Inc." o | r "Co". A pro | fessional | ted" of corpor | r the ation |
| B. Enter new principal office address, if applica | | | | TA'S | - 0 | |
| (Principal office address <u>MUST BE A STREET A</u> | <u>IDDRESS</u>) | ı | | C A | ال و | than party |
| | | | | - SVH | JUN 21 | NO COMPANY |
| | | strangener & transit spray returns a related property resolutions | | - SER | | Commences Commences |
| C. Enter new mailing address, if applicable: | | | | 2° | * | |
| (Mailing address <u>MAY BE A POST OFFICE</u> | <u>BOX</u>) | | | R S | <u>5</u> .5 | O . |
| | | | | | | |
| | | | | | | |
| D. If amending the registered agent and/or reginew registered agent and/or the new register | | | orida, enter the | e name of | the | |
| Name of New Registered Agent: | | | | | | |
| New Registered Office Address: | 1168 S (Flo | οω 47 st orida street addre | ·, 2nd F | ۱. | | |
| | M IAM (City | : L | , Flo (Zip Cod | orida <u>3</u> e) | 3155 | <u> </u> |
| New Registered Agent's Signature, if changing | | | | | | |
| I hereby accept the appointment as registered ager | nt. Lam fan | nitiar with and a | iccept the obligi | ations of ti | he posi | tion. |
| Sierr | viture of No | | ant if changing | | | |
| Sign | mare of ive | " Acgmered Ag | em, g enunging | | | |

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)

| <u>Title</u> | <u>Name</u> | Address · · | Type of Action |
|------------------------------------|--|---|---------------------|
| D | Maria Brenteson | 7168 SW 47 St., ZndP1 MIAMI, FL. 33153 | . □ Add □ Remove |
| | | | ☐ Add ☐ Remove |
| | · | | ☐ Add ☐ Remove |
| - | or adding additional Articles, enter chional sheets, if necessary). (Be specific) | | |
| The pre | esident of Scientifi | a Nutrition, Alle | en Brenteson, |
| gives, | new added director, 1 | Maria Brenteson, | 1 share |
| of s | Scientific Mutrition. | Leaving Aller | n Brenteson |
| | 19 shares of Scientifi | | |
| _ | idez with 50 Sha | | |
| • | Brenteson with 1 | | |
| F. <u>If an amen</u> provisions | dment provides for an exchange, reclas for implementing the amendment if no pplicable, indicate N/A) | sification, or cancellation of iss | |
| The pre- | sident of Scientific Nut | rition, Allen Bre | esteson, |
| gives, ne | wadded director, Maria | Brenteson, 1 share | of Scientific |
| Nutrition | Leaving Allen Bre | nteson with 49 sh | iares of |
| | = Nutrition, \$ VP, So | | |
| | , and Director, M. | | |
| Share. | | | ······ |
| | | | |

| The date of each amendment(s) adoption: 5/5/09 | | |
|---|--|--|
| Effective date if applicable: | 5/5/09 | |
| | (no more than 90 days after amendment file date) | |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| The amendment(s) was/wer by the shareholders was/we | re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval. | |
| | re approved by the shareholders through voting groups. The following statement of for each voting group entitled to vote separately on the amendment(s): | |
| "The number of votes | east for the amendment(s) was/were sufficient for approval | |
| by | .,, | |
| , | (voting group) | |
| action was not required. The amendment(s) was/wer action was not required. | re adopted by the incorporators without shareholder action and shareholder | |
| Dated | 5 5 09 | |
| sele | a director, president or other officer – if directors or officers have not been octed, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary) | |
| | Allen Brenteson (Typed or printed name of person signing) | |
| | President (Title of person signing) | |