PO3 000134663

(Re	questor's Name)			
(Ad	dress)	<u> </u>		
(Ad	dress)			
(Cit	ty/State/Zip/Phon	e #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate	s of Status		
Special Instructions to Filing Officer:				
		(3)		
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: FORCE IN	VESTMENT, INC	<u> </u>	
DOCUMENT NUMBER: P03000134663				
	f Amendment and fee are sul			
Please return all corresp	Please return all correspondence concerning this matter to the following:			
Anthony Alfonso				
_	Name of Contact Person			
	Force Investment	. Inc.		
		Firm/ Company		
-	7740 SW 70 Stre	, ,		
-		Address		
!	Miami, Florida 33156			
_		City/ State and Zip Code	2	
aa(0	nutriforce.com			
		ed for future annual report	notification)	
For further information concerning this matter, please call:				
Mari Figueredo305468-1600				
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:				
□ \$35 Filing Fee	■\$43.75 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 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		

Articles of Amendment to Articles of Incorporation of

FORCE INVESTMENT,			_
(Name of Corporation as P03000134663	currently filed with the Flo	orida Dept. of State)	
	nt Number of Corporation (if	known)	_
	•	Florida Profit Corporation adopts the follow	ving amendment(s) t
its Articles of Incorporation:	1000, 1 fortua statutes, illis 1	Tortuu 1 rojii Corporation adopts tile totton	ing amenament(s)
A. If amending name, enter the new na	ame of the corporation:		
			The new
	nation "Corp," "Inc," or "C	n," "company," or "incorporated" or the Co". A professional corporation name mus P.A."	
B. Enter new principal office address, if applicable:		9470 SW 77 Avenue	
(Principal office address MUST BE A S	TREET ADDRESS)	#O2	_
		Miami, FL 33156	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		9470 SW 77 Avenue	T T
		#O2	ILED 29 PH
		Miami, FL 33156	
D. If amending the registered agent an new registered agent and/or the new		ess in Florida, enter the name of the	19
Name of New Registered Agent	Anthony Alfonso		
	9470 SW 77 Ave	enue #O2	
	(Florida stre	·	
New Registered Office Address:	Miami (City)	, Florida 33156 (Zip Code)	_ _
	(0,0)	(Lip Code)	
New Registered Agent's Signature, if c		with and accept the obligations of the position	n
			•
Si	gnature of New Registered A	gent, 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	<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>	Name	<u>Addres</u> s
1) Change	DS	Adriana Alfonso	7740 SW 70 Street
Add			Miami, FL 33143
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
0			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	<u>., ., ., .</u> ,		
	<u> </u>			· · · · · ·
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		· <u> </u>		
				
				
				
				
lf an amendment provides for an exch	ange, reclassificati	on, or cancellation	on of issued sh	ares.
provisions for implementing the amer	ndment if not cont	ained in the amer	ndment itself:	
(if not applicable, indicate N/A)				
(ly not applicable, matcale N/A) /A				
				<u></u> _

t ne date of each amendment(s) adoption:	, it other than the
September 4, 2013	
(no more than 90 days after amendment file of	late)
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	amendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following the separately provided for each voting group entitled to vote separately on the amendation of the separately provided for each voting group entitled to vote separately on the amendation of the separately of	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action as action was not required.	nd shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and shaction was not required.	areholder
Dated 8/26/201/3	
Signature (By a director, president or other officer – if directors or officers has selected, by an incorporator – if in the hands of a receiver, trustee, appointed fiduciary by that fiduciary)	
Anthony Alfonso	
(Typed or printed name of person signing	3)
President	
(Title of person signing)	