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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT: REMC	OVAL LINDA D'AMATO AS SE	CRETARY/TREASURER	
DOCUMENT NU	MBER: PO4000042525		
The enclosed Artic	eles of Amendment and fee a	are submitted for filing.	
Please return all co	prrespondence concerning th	is matter to the following:	
FLO	RENCIO V. ELLO, MD		
	(Na	ame of Person)	
<u>ALPI</u>	HA WEIGHT AND WELLNESS		
	(Name	of Firm/ Company)	
2012	DUTCHESS LANE		
		(Address)	
WINT	ER PARK, FL 32792		
For further informa	tion concerning this matter,	ate/ and Zip Code) please call:	
FLORENCIO V. ELL	O MD	at (321) 282 8563	
TOTAL TOTAL	(Name of Person)	at (321) 282 8563 (Area Code & Daytime 1	Telephone Number)
Enclosed is a check	for the following amount:		
St \$35 Fitting 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 409 E. Gaines Street Tallahassee, FL 32399	

Articles of Amendment to Articles of Incorporation of FILED

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ALPHA WEIGHT AND WELLNESS MEDICAL CLINIC, PA

GILAHASSEE.FLORIDA

(Name of corporation as currently filed with the Florida Dept, of State)

PO4000042525
(Document number of corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
NEW CORPORATE NAME (if changing):
(must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
FLORENCIO V. ELLO, MD PRESIDENT
ADD- REGINA ELLO - SECRETARY AND TREASURER
DELETE- LINDA D'AMATO - SECRETARY, TREASURER
(Attack - 13%
(Attach additional pages if necessary)
If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A
(continued)

The date of	of each amendment(s) adoption: 4/5/04
Effective of	date if applicable: 4/5/04
	(no more than 90 days after amendment file date)
Adoption	of Amendment(s) (<u>CHECK ONE</u>)
Ø	The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
□	The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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)
	The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
	The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Signed this	s <u>15</u> day of <u>JUNE</u> , <u>2004</u> .
	Signature (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	FLORENCIO V. ELLO, MD (Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)

FILING FEE: \$35