P040000119071

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	<i>⇒</i> #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	; _ Certificates	of Status
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COVER LETTER

TO: Amendment Section Division of Corporations	•	
NAME OF CORPORATION:	nity Longevity	, INC.
	00119071	
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
A. Forgie	ONE Contact Person)	
Infinite (Firm)	y Longevity (Company)	
7491	N. Federal Hu	nh - C . 2
<u>Boca</u> (City/ State	Caton FL 339 e and Zip Code)	487
For further information concerning this matter, pl	ease call:	
A Forgione (Name of Contact Person)	at (2440
	(Area Code & Daytime I	elepnone Number)
Enclosed is a check for the following amount:		
\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee Certificate of Statu Certified Copy (Additional Copy is enclosed)
Mailing Address	Street Address	
Amendment Section Division of Corporations	Amendment Section Division of Corporations	
P.O. Box 6327	Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

	Art	ticles of Amendment		OTAPO
	Arti	to cles of Incorporation of		TALLASTA PA
	Infi	nity I and	exity T	AHASSEE, FIST
	(Name of corporation as	currently filed with the Florid	a Dept. of State)	LOR,
	P04	1000 1190	71	
	(Document r	number of corporation (if kno	wn)	
_		006, Florida Statutes, this Articles of Incorporation:	s <i>Florida Profit Co</i> i	rporation
NEW CORPORAT	ΓΕ NAME (if changing	<u>g):</u>		
		or "incorporated" or the abbre "chartered", "professional ass		
		THAN NAME CHANG		Number(s)
and/or Article Title(s) being amended, adde	ed or deleted: (BE SPEC	IFIC)	1 = 1 = 1
Article	V - remov	le Vice Presi	dent 1 Line	la rongione.
	range V.Pr	e Vice Press	Inthony F.	orgione
7373 h	1. Country	(lub Blrd	Boca Rator	nFL
33487	•	•		
	IE A For	gione can not b	e Pres V.	President
Hen D.	manua 1/ Pr	esident fitte	complete	//
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		1.0		<i>f</i> .
mussion to u	(Attach :	V.Pres> XXX additional pages if necessary)	Xund o Fo	igione
			\mathcal{O}	LINDA FORGION
	Wides for evenonge re-	Classification or conceil	ation of issued shalf	ω, ρεστισίσεισ
f an amendment pro	—	ctassification, or cancella		ole, indicate N/A)
f an amendment pro	—			ole, indicate N/A)

(continued)

The date of each amendment(s) adoption: 4/5/07
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 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.
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) (Typed or printed name of person signing) (We illet.)
(Title of person signing)

FILING FEE: \$35