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Amendicas

JUL 29 2015

I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: I A NUTRITION,	INC.	
DOCUMENT NUM	P04000164231		
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	DIANE LAGACE		
		Name of Contact Person	L
	I A NUTRTION, INC.		
		Firm/ Company	
	83 WHITE OAK DRIVE		
		Address	
	BERLIN, CT 06037		
		City/ State and Zip Code	
dian	e@innerarmour.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
DIANE LAGACE	•	.860	454 7730
		at (
Name	of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	rtment 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)
Am Div P.C	illing Address tendment Section vision of Corporations D. Box 6327	Amend Divisio Clifton	Address ment Section n of Corporations Building
Tallahassee, FL 32314		2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

I A NUTRITION, INC. (Name of Corporation as currently filed with the Florida Dept. of State) I A NUTRITION, INC. (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, 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)	Title	<u>Name</u>	Address
l)Change			
Add			
Remove			
2)Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			-
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Artic	eles, enter change(s) here:
(Attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
·	
·	
If an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amen	dment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
Change number of shares of stock from 10,0	000,000 (10 million) to 100,000,000 (100 million)
	
•	

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The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Ţ.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	<u> </u>
	(no more inan 90 days after amenament file date)	
Note: If the date inserted in this bedocument's effective date on the De	plock does not meet the applicable statutory filing requirements, this date vepartment of State's records.	vill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
_	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
7/23/2015 Dated		
Signature	Dian Lagra	
(By a d	director, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	DIANE LAGACE	
	(Typed or printed name of person signing)	
	VICE PRESIDENT	
	(Title of person signing)	