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SECRETARY OF STATE
TALLAHASSEE, FLORID

Amend + NLC PA

Dr. William J. Rice, DC, DACBN, LAc, FACCN

Serving the community since 1977

10370 Osprey Trace West Palm Beach, FL 33412 561.776.5590

e-Mail: drbill@writeme.com URL: www.healthy-answers.com Fax:325.204.7026

31 July 2006

Amendment Section
Division of Corporations
Clifton Bldg
2661 Executive Center Circle
Tallahassee, FL 32301

RE: Wholistic Health Center, Inc.

Dear Ms. Payne:

Thank you so much for helping to expedite this request. It is greatly appreciated.

I am enclosing the articles of Amendment to Articles of Corporation form (which I hope is correct). And I am enclosing a check for \$43.75, which includes the filing fee and a certified copy.

Please process this document and forward the certified copy to me at the address above.

If you can fax a copy of the form when it is complete that would be great.

Thank you again.

Sincerely,

William J. Rice

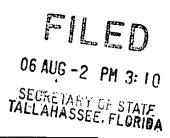
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: DR. WILLIAM	J. RICE, CHARTERED	
DOCUMENT NUMBER: PO5000152051		
The enclosed Articles of Amendment and fee are	e submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
Name of	Rice	
(Name of	Contact Person)	<u> </u>
OR WILLIAM J. P	LICE, chartered	
/Firm	ı/ Company)	_
10370 OSPREY TR	1	
	A ddwara)	<u> </u>
	ACU FL 33412	
(City/ Stat	te and Zip Code)	_
For further information concerning this matter, p	lease call:	
DR BILL RICE	at () (Area Code & Daytime Telephon	> '
(Name of Contact Person)	(Area Code & Daytime Telephon	e Number)
Enclosed is a check for the following amount:		
□\$35 Filing Fee & Certificate of Status	Certified Copy C (Additional copy is C enclosed) (A	52.50 Filing Fee ertificate of Status ertified Copy Additional Copy s 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



DR. WILLIAM J. RICE, CHARTERED

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

P05000152051
(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):
WHOLISTIC HEALTH CENTER, INC.
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
ARTICLE II IS AMENDED TO REFLECT NEW PLACE OF BUSINESS:
3600 FOREST HILL BLVD. STE 3
WEST PALM BEACH, FL 33406
MAILING ADDRESS:
10370 DSPREY MACE
WEST PALM BEACH FL 33412
(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 each amendme	nt(s) adoption: DECEMBER 15, 2005
Effective date if <u>applicable</u>	SAME AS ABOVE
	(no more than 90 days after amendment file date)
Adoption of Amendment(s	(CHECK ONE)
	s) was/were approved by the shareholders. The number of votes cast for by the shareholders was/were sufficient for approval.
	s) was/were approved by the shareholders through voting groups. The ent must be separately provided for each voting group entitled to vote amendment(s):
"The number	of votes cast for the amendment(s) was/were sufficient for approval by
	(voting group)
	s) was/were adopted by the board of directors without shareholder action ction was not required.
	s) was/were adopted by the incorporators without shareholder action and n was not required.
sele	a director, president or other officer - if directors or officers have not been ected, by an incorporator - if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
w	ILLIAM J. RICE
	(Typed or printed name of person signing)
Pf	RESIDENT
	(Title of person signing)

FILING FEE: \$35