P0600027392

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Healthy H	lomes Americ	a, Inc.
DOCUMENT NUMB	ER: P06000027	392	
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corresp	pondence concerning this ma	tter to the following:	
	Tracy Walter		
•		Name of Contact Person	1
	Healthy Homes	s America, Inc	<u>.</u>
•		Firm/ Company	
l	611 S. Fort Ha	rrison Ave, Ur	nit 105
		Address	
	Clearwater, Fl	33756	
		City/ State and Zip Code	е
trac	cy@tracywalte	r.com	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call	
lra	cy Walter	at (727	de & Daytime Telephone Number
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)
Mail	ing Address	Street	Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Healthy Homes America, Inc.	
(Name of Corporation as currently filed with the Flo	orida Dept. of State)
P06000027392	1
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "F	Co". A professional corporation name must contain the P.A."
B. Enter new principal office address, if applicable:	611 S. Fort Harrison Ave, Unit 105
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Clearwater, FI 33756
	S 3)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	611 S. Fort Harrison Ave, Unit 105
	Clearwater, FI 33756
D. If amending the registered agent and/or registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent Tracy Walter	
611 S. Fort Harris	on Ave, Unit 105
(Florida stre	· ·
New Registered Office Address: Clearwater	, Florida 33756
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w Signature of New Registered Agent.	

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	PT Jol	John Doe		
X Remove	<u>V</u> <u>M</u> i	Mike Jones		
X Add	<u>SV</u> <u>Sa</u>	lly Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) Change	DS	Duane Wright	13785 Walsingham Rd, Unit 424	
Add			Largo, FI 33774	
X Remove				
2) X Change	P	Tracy Walter	611 S. Fort Harrison Ave, Unit 105	
Add			Clearwater, Fl 33756	
Remove				
3)Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
	
<u>f an amendment provides for an exch</u>	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:

The date of each amendment(s) adoption: 07/18/2012				
Effective date if applicable:				
_ ·	(no more than 90 days after amendment file date)			
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval.			
	proved by the shareholders through voting groups. The following statement 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)			
	(voting group)			
☐ The amendment(s) was/were add action was not required.	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			
Dated	118/2012			
Signature				
(By a d	irector, president or other officer - if directors or officers have not been			
selecte	d, by an incorporator - if in the hands of a receiver, trustee, or other court			
appoint	ted fiduciary by that fiduciary)			
	(Typed or printed name of person signing)			
	(Typed or printed name of person signing)			
	President			
	(Title of person signing)			