## P07000000610

| (Re                     | equestor's Name)   | <del></del> |
|-------------------------|--------------------|-------------|
| (Ad                     | ldress)            |             |
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| (Cid                    | ty/State/Zip/Phone | #)          |
| PICK-UP                 | ☐ WAIT             | MAIL        |
| (Bu                     | ısiness Entity Nam | ne)         |
| (Dc                     | ocument Number)    |             |
| Certified Copies        | _ Certificates     | of Status   |
| Special Instructions to | Filing Officer:    |             |
|                         |                    |             |
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Office Use Only



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SECKBIARY OF STATE TALL ANASSEE, FLORIDA

DEC 1 8 2014 C. CARROTHERS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPOR   | ATION: NEW WAVE WE                          | LLNESS INC   |   |
|--|---|--|---|
| DOCUMENT NUMB  |   |  |   |
|  | of Amendment and fee are su                 | bmitted for filing.  |   |
| Please return all corres   | pondence concerning this ma                 | tter to the following:   |   |
|  | ROBERT CHRISTIANO                           |  |   |
| •  |   | Name of Contact Person   | 1   |
|  | NEW WAVE WELLNESS I                         | NC   |   |
| •  |   | Firm/ Company  |   |
|  | 118 GEORGE LAWRENCE                         | • •  |   |
| -  |   | Address  |   |
|  | EATONTON, GA 31024                          |  |   |
| •  |   | City/ State and Zip Cod  | e   |
| WELI   | LMANDOC10@GMAIL.CO                          | М  |   |
| <del></del>  | E-mail address: (to be us                   | sed for future annual report                                       | notification)   |
| For further information  | concerning this matter, pleas               |  | 991-5254  |
| Name of Contact Person   |   | at ( 706   | de & Daytime Telephone Number   |
| rvaine c   | T 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)    |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 |   | Ameno<br>Divisio<br>Clifton<br>2661 E                              | Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301 |

## **Articles of Amendment** Articles of Incorporation of

| (Name o   | f Corporation as current                                  | ly filed with the Florida Dept. of State)  |                                      |                |
|---|---|--|--------------------------------------|----------------|
| P0700000610   |   |  |                                      |                |
|   | (Document Number of                                       | of Corporation (if known)  |                                      |                |
| Pursuant to the provisions of section 607. ts Articles of Incorporation:  | 1006, Florida Statutes, this                              | Florida Profit Corporation adopts the follo  | owing amend                          | ment(s) to     |
| A. If amending name, enter the new na   | me of the corporation:                                    |  |                                      |                |
|   |   |  | The n                                | iew            |
| name must be distinguishable and cont<br>"Corp.," "Inc.," or Co.," or the design<br>word "chartered," "professional associa | ation "Corp," "Inc," or                                   | on," "company," or "incorporated" or the "Co". A professional corporation name m"P.A." | ne abbreviati<br>nust contain<br>Pro | ion<br>the     |
| 3. Enter new principal office address, i  | if applicable:  | 118 GEORGE LAWRENCE WAY  |                                      | 90.<br>•       |
| Principal office address <u>MUST BE A S</u> T   |   | EATONTON, GA 31024   | (AR)<br>ASS                          | C 1.7          |
|   |   |  | E PR                                 | P              |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)                                     |   |  |                                      | ည် (           |
|   |   |  | <b>→</b> _1                          |                |
|   |   | 118 GEORGE LAWRENCE WAY  | AIE<br>PRIOT                         | 84:            |
|   |   | 118 GEORGE LAWRENCE WAY EATONTON, GA 31024   | AIE<br>O                             | - <del>L</del> |
|   |   |  | ATE<br>DRIOT                         | <br>60<br>     |
| (Mailing address <u>MAY BE A POST (</u>   | OFFICE BOX)   | EATONTON, GA 31024   | ATE<br>DRIO7                         | -<br>&<br>-    |
|   | OFFICE BOX)<br>d/or registered office add                 | EATONTON, GA 31024  Iress in Florida, enter the name of the                            | ATE<br>DRION                         | . <b>4</b> 8   |
| (Mailing address MAY BE A POST (  ). If amending the registered agent an new registered agent and/or the new                | OFFICE BOX)<br>d/or registered office add                 | EATONTON, GA 31024  Iress in Florida, enter the name of the                            | ATE:                                 | : <b>-</b>     |
| (Mailing address MAY BE A POST (  | OFFICE BOX)<br>d/or registered office add                 | EATONTON, GA 31024  Iress in Florida, enter the name of the s:                         | ATE:                                 | : <b>4</b> 8   |
| (Mailing address MAY BE A POST (  ). If amending the registered agent an new registered agent and/or the new                | d/or registered office add<br>v registered office address | EATONTON, GA 31024  Iress in Florida, enter the name of the s:                         | ATE<br>DRION                         | : <b>-</b>     |
| (Mailing address MAY BE A POST (  ). If amending the registered agent an new registered agent and/or the new                | d/or registered office add<br>v registered office address | EATONTON, GA 31024  Iress in Florida, enter the name of the s:  DRIVE, STE D           |                                      | : <b>4</b> 8   |

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.

| X Change                      | <u>PT</u>    | John Do  | <u>oe</u>         |                             |
|-------------------------------|--------------|----------|-------------------|-----------------------------|
| X Remove                      | <u>v</u>     | Mike Jo  | <u>nes</u>        |                             |
| X Add                         | <u>sv</u>    | Sally Sn | <u>nith</u>       |                             |
| Type of Action<br>(Check One) | <u>Title</u> |          | Name              | <u>Addres</u> s             |
| 1) X Change                   | P            | _        | ROBERT CHRISTIANO | <br>118 GEORGE LAWRENCE WAY |
| Add                           |              |          |                   | EATONTON, GA 31024          |
| Remove                        |              |          |                   |                             |
| 2) X Change                   | T            |          | SARA J CHRISTIANO | <br>118 GEORGE LAWRENCE WAY |
| Add                           |              |          |                   | EATONTON, GA 31024          |
| Remove                        |              |          |                   |                             |
| 3)Change                      |              | _        | <del></del>       |                             |
| Add                           |              |          |                   |                             |
| Remove                        |              |          |                   |                             |
| 4) Change                     |              |          |                   | <br>                        |
| Add                           |              |          |                   |                             |
| Remove                        |              |          |                   |                             |
| 5) Change                     |              |          |                   | <br>                        |
| Add                           |              |          |                   |                             |
| Remove                        |              |          |                   |                             |
| 6) Change                     |              |          |                   |                             |
| Add                           | <del></del>  |          |                   |                             |
| Remove                        |              |          |                   |                             |
| Keniove                       |              |          |                   |                             |

| Attach additiona | dding additional Art<br>sheets, if necessary). | (Be specific)     |                   |                     |              |
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| f an amendmen    | t provides for an excl                         | hange reclassific | ation or cancella | ition of iccuad che | rec          |
| provisions for i | mplementing the ame                            | endment if not co | ntained in the an | nendment itself:    | 11 03        |
| (if not appli    | cable, indicate N/A)                           |                   |                   |                     |              |
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| the date of each amendment(s) adoption:  | than th   |
|--|-----------|
| Effective date if applicable:  |           |
| (no more than 90 days after amendment file date)   | -         |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list document's effective date on the Department of State's records.            | ted as th |
| Adoption of Amendment(s) (CHECK ONE)   |           |
| The amendment(s) was/were adopted 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)  |           |
| (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.   |           |
| Dated 12/15/15 Signature R.M. Chmby  |           |
| Signature R. M. Chan Bu  |           |
| (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)   |           |
| ROCET M. CHRSTIANS (Typed or printed name of person signing)   | _         |
| (Typed or printed name of person signing)  |           |
| PRESILENT  | _         |
| (Title of person signing)  |           |