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SECRETARY OF STATE
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JAN 3 1 2013 J. ROBERTS

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: HEALTHY CENTURY, CORP. P08000004195 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JOHNNY NUHFER Name of Contact Person NUHFER TAX SERVICE Firm/ Company 15431 SW 302 ST Address **HOMESTEAD FL 33033-3524** City/ State and Zip Code amjmhim@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JOHNNY NUHFER Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □ \$35 Filing Fee **■\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment

to Articles of Incorporation FILED 13 JAN 29 PM 12: 42

of

HEALTHY CENTURY, CORP.

SECRETARY OF STATE

(Name of Corporation as currently filed with the Florida Dept. of State) P08000004195 (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: The new 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 "Go". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 4658 SW QUEZON ST B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) PORT SAINT LUCIE FL 34953 C. Enter new mailing address, if applicable: 4658 SW QUEZON ST (Mailing address MAY BE A POST OFFICE BOX) PORT SAINT LUCIE FL 34953 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: MARTIN, AGUSTIN Name of New Registered Agent 4658 SW QUEZON ST (Florida street address) PORT SAINT LUCIE New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I any familiar with and accept the obligations of the position. e 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	PT John	n Doe	
X Remove	<u>V</u> <u>Mik</u>	te Jones	
X Add	SV Sall	y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	DP	Martin, Agustin	4658 SW Quezon ST
X			Port Saint Lucie FL
Remove			34953
2) Change	DST	Centeno-Martin, Jeanette	4658 SW Quezon ST
X Add			Port Saint Lucie FL
Remove			34953
3) Change	P	Fernandez, Gustavo A	9222 SW 97 Place
Add			Miami FL 33176
X Remove		·	
4) Change	VP_	Londono, Ana C	9222 SW 97 Place
Add ·	-	,	Miami FL 33176
X Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	cles, enter change(s) here:
(Attach additional sheets, if necessary).	(ne specific)
/A	
	
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If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
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provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

The date of each amendment(s) add	option: 01/17/2013			
Effective date if applicable: 01/	17/2013			
(no more than 90 days after amendment file date)				
Adoption of Amendment(s)	(CHECK ONE)			
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.			
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):			
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval			
by	(voting group)			
The amendment(s) was/were adop action was not required.	ted by the board of directors without shareholder action and shareholder			
☐ The amendment(s) was/were adop action was not required.	ted by the incorporators without shareholder action and shareholder			
Dated 01/17/2	013			
selected,	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)			
<u>(</u>	Gustavo A Fernandez			
	(Typed or printed name of person signing)			
Ī	President			
	(Title of person signing)			