P08000020219

(Re	equestor's Name)	
. (Ac	ldress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nam	е)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use Only	···-



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04/29/10--01022--003 **35.00

SECRETARY OF STATE FALLAHASSEE, FLORIDA

AMINA ID

COVER LETTER

TO: Amendment Section Division of Corporations

10

NAME OF CORP	ORATION:	NEW LIFE GENERATIONS, INC.		
	MBER:			
The enclosed Artic	les of Amendment and	fee are submitted for filing.		
Please return all co	rrespondence concerni	ng this matter to the following:	•	
		DOMENIC H. CALICCHIA		
		Name of Contact Person		
	PROFESSIO	ONAL ACCOUNTING SERVICE, INC.		
·		Firm/ Company		
	15	20 BOTTLEBRUSH DR NE		
•		Address	20	
		PALM BAY FL 32905		X
•		PALM BAY FL 32905 City/ State and Zip Code City/ State and Zip Code be used for future annual report notification) CRETARY OF STATE C	2010 JUL -6 AH 8: 0	7
	E-mail address: (to	be used for future annual report notification)	SE 1	-
For further informa	ntion concerning th is m	atter, please call:	8: 00	
		at ()		
Name	of Contact Person	at () Area Code & Daytime Telephone Number	•	
Enclosed is a check	k for the following amo	ount made payable to the Florida Department of State:		
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certified Copy Certificate of Statu (Additional copy is enclosed) Certified Copy (Additional Copy ()
P.O. Box 60	t Section Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301



May 3, 2010

DOMENIC H. CALICCHIA PROFESSIONAL ACCOUNTING SVC. 1520 BOTTLLEBRUSH DR. NE PALM BAY, FL 32905

SUBJECT: NEW LIFE GENERATIONS, INC.

Ref. Number: P08000020219

We have received your document for NEW LIFE GENERATIONS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

The document must have original signatures.

You failed to sign the document.

The name and title of the person signing the document must be noted beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Letter Number: 110A00010939

Irene Albritton Regulatory Specialist II

www.sunbiz.org

Articles of Amendment Articles of Incorporation

NEW LIFE GENERATIONS, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P08000020219 (Document Number of Corporation (if known)

ame must be distinguishable and conta	in the word "corporation," "ci	The interpolated or "incorporated or
bbreviation "Corp., " "Inc., " or Co., " or ame must contain the word "chartered," "	the designation "Corp." "Inc." (professional association," or the	or "Co". A professional corpora abbreviation "P.A."
3. Enter new principal office address, if Principal office address MUST BE A STR		
Concepta office address <u>to bot on A STR</u>		
	<u></u>	
Enter new mailing address, if applica (Mailing address MAY BE A POST OF		
(Muning duaress MAY DE A POST, OF	TICE BOX)	
). If amending the registered agent and/ new registered agent and/or the new r		lorida, enter the name of the
Name of New Registered Agent:	DAWANA LEWIS	
	3270 GALLEON AVE., N	
New Registered Office Address:	(Florida street addı	ress)
	PALM BAY	, Florida 32905
	(City)	(Zip Code)

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)

Title	Name	Address	Type of Action
<u>D</u>	GRIGSBY, JARVIS	1474 MEADOWBROOK RD PALM BAY FL 32905	☐ Add ☑ Remove
D	OSBORNE, RICKY	3370 GALLEON AVE NE PALM BAY EL 32905	□ Add ☑ Remove
		1	☐ Add ☐ Remove
	g or adding additional Articles, enter clional sheets, if necessary), (Be specific		
provisions	dment provides for an exchange, recla for implementing the amendment if no applicable, indicate N/A)		

The date of each amendment	t(s) adoption: APRIL 23, 2010
	(date of adoption is required)
Effective date if applicable:	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
The amendment(s) was/we must be separately provide	ere approved by the shareholders through voting groups. The following statement and 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)
action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without sharcholder action and shareholder
Dated	1/23/10
Signature _	Atawara Sevis
sel	v, 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)
	Lawana Lewis (Typed or printed name of person signing)
-	(Typed or printed name of person signing)
	President
	(Title of person signing)