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A. BUTLER MAY - 5 2022

## COVER LETTER

TO: Amendment Section

Division of Corporations	•
NAME OF CORPORATION: Solut	IONS A Healthly Weight Loss In
DOCUMENT NUMBER: PO 800	00041187 0 0
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this n	natter to the following:
	Alenda Coto
	Name of Contact Person  Fit Wucht 2055
P	Address FI 32368
Glenou	City/ State and Zip Code  4 CATON & 9 MAIL . UOM
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, ple	ease call:
halere Cato	D at 850, 251-6020
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount mad	le payable to the Florida Department of State:
□ \$35 Filing Fee  □\$43.75 Filing Fee & Certificate of Status	
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee
Tallahassec, FI, 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation

FILED

	2022 MAY -5 PM 1: 0c
(Name of Corporation as currently fil	
Solutions A Hearthey Westerfit LOS	5 PROBLEM STATES
Document Number of Co	rporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flor</i> its Articles of Incorporation.	ida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "comp "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A pr "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:  Name of New Registered Agent  Agent	CATO CATO CIR NE Iddress) Florida F/ 32308
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with  Signature of few Registered	and accept the obligations of the position.  It  H  tered Agent, if changing

Check if applicable

[1] The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

Please note the officer/director title by the first letter of the office title:

 $P \neq President; V \neq Vice President, T \neq Treasurer; S \neq Secretary; D \neq Director; TR \neq Trustee; C \neq Chairman or Clerk; CEO \neq Chief Executive Officer; CFO + Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$ 

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> <u>J</u>	<u>ohn Doe</u>				
X Remove	<u>Y</u> <u>A</u>	Mike Jones				
<u>X</u> Add	<u>sv</u> <u>s</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s		0
i) Change	PMS	Steph	anie () C	msp N 44	14 High	GROVE. 9L
Add			V		lahassa Loukli	32309
Remove 2) Change	Jus	KG1	enda Ca	1		<u> 1UD</u> Apt 8501
_X_Add	<b>A</b>	,	•		lahassa	<u> </u>
Remove 3) Change					origa	<u>32</u> 308
Add						
Remove						
4) Change				<del></del>		
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6) Change						
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	idditional Articles, enter if necessary). (Be spec			
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 		,		
	les for an exchange, recenting the amendment indicate N/A)			
1.1.1				

The date of each amendment(s) ado	option: 57 d2	, if other than the
date this document was signed		
Effective date <u>if applicable</u> :	5-5-22	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blockdocument's effective date on the Department.	ick does not meet the applicable statutory filing requirements, this dartment of State's records.	fate will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopt action was not required.	ted by the incorporators, or board of directors without shareholder act	tion and shareholder
The amendment(s) was/were adopt by the shareholders was/were suff	ited by the shareholders. The number of votes cast for the amendment ficient for approval.	u(s)
•	11	
•	oved by the shareholders through voting groups. The following statem	nent
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The amendment(s) was were appro- must be separately provided for ea	oved by the shareholders through voting groups. The following statem ach voting group entitled to vote separately on the amendment(s): or the amendment(s) was/were sufficient for approval	nent
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Dated  Signature  (By a dires selected.)	oved by the shareholders through voting groups. The following statem ach voting group entitled to vote separately on the amendment(s):  or the amendment(s) was/were sufficient for approval  (voting group)  (voting group)  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 could induciary by that fiduciary)	