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SECRETARY OF STATE TALLAHASSEE, FLORIDA

Amend (10/31/17)

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: The Water Clinic of South Florida, Inc				
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee	e are submitted for filing.			
Please return all correspondence concerning	this matter to the following:			
Angre Dunlag	Name of Contact Person			
The Water Clinic o	Firm/Company			
124 Jupiter Stre	Address			
Jupiter, Fr 33	City/ State and Zip Code COM used for future annual report notification)			
angle e multar	ised for future annual report notification)			
For further information concerning this matter	er, please call:			
Angre Dunlag Name of Contact Person	at (<u>Gol</u>) <u>575-114</u> Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount	t made payable to the Florida Department of State:			
■ \$35 Filing Fee	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)			
Mailing Address	Street Address			
Amendment Section	Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327 Tallahassee FL 32314	Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

	of	
The Water Clinic of.	South Florida, In	10.
(Name of Corporation as curre		
(Document Num	ber of Corporation (if known))
rsuant to the provisions of section 607.1006 endment(s) to its Articles of Incorporation:	i, Florida Statutes, this <i>Flori</i>	da Profit Corporation adopts the
If amending name, enter the new name of	the corporation:	
		The n
me must be distinguishable and contain to breviation "Corp.," "Inc.," or Co.," or the me must contain the word "chartered," "prof	designation "Corp," "Inc,"	or "Co". A professional corporat
Enter new principal office address, if appl	licable:	
rincipal office address <u>MUST BE A STREE</u>		
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFIC		
If amending the registered agent and/or re	egistered office address in F	lorida, enter the name of the
new registered agent and/or the new regis	tered office address:	
Name of New Registered Agent:		
New Registered Office Address:	(Florida street add	ress)
		Florido
•	(City)	, Florida (Zip Code)
	• • •	
ew Registered Agent's Signature, if changing the reby accept the appointment as registered as		accent the obligations of the positi
e. ee, accept the appointment as registered a	Series & Sorry January In the Miles	accept the congunities of the positi
S	ignature of New Registered A	gent. II 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
VP·	Donovan Dunlap	SUGG Pennock Point Road Dupiter, FL 33458	Add 🗷 Remove
<u> 4v</u>	Angle Dunlap	51698 Pennock Point Road Supter, FC 33458	
	iding or adding additional Articles, encoderational sheets, if necessary). (Be specified)		
	imendment provides for an exchange,		
	ions for implementing the amendment not applicable, indicate N/A)	if not contained in the amendmen	nt itself:

The date of each amendment(s) adoption:
Effective date <u>if applicable</u> :	(date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.
	approved by the shareholders through voting groups. The following statemen for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval
by	.,,,,
6	voting group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated	18/2010 OURUOM Charles
(By a select	director, president or other officer have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	President (Title of person signing)