## P080006143

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SECNCTARY OF STATE
AND ANASSEE, FLORIDA

NC

DEC 04 2013

R. WHITE

## **COVER LETTER**

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: Bhava Lifestylist, Inc. DOCUMENT NUMBER: P08000066143 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Ashley Halley Name of Contact Person Firm/ Company 3308 W. Knights Ave Address Tampa, FL 33611 City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (813) 690·/335

Area Code & Daytime Telephone Number Ashley Halley Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$52.50 Filing Fee ■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

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

FILED

Bhava Lifestylist, Inc.

13 NGV 26 PM 3:00

SECRETARY OF STATE HALLAHASSEE, FLORIDA (Name of Corporation as currently filed with the Florida Dept. of State) P08000066143 (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: Ashley Halley, Inc. 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 "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: Florida (Citv) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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)

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 <math>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	<u>PT</u>	John Doe	
X Remove	V	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Remove  2) Change Add			
Remove 3) Change			
Remove 4) Change Add			
Change Add Remove			
6) Change Add Remove			

(Attach	ing or adding additional Articles, enter change(s) here:  Iditional sheets, if necessary). (Be specific)
I/A	
**	
lf an a	endment provides for an exchange, reclassification, or cancellation of issued shares,
provi	ns for implementing the amendment if not contained in the amendment itself:
()	ot applicable, indicate N/A)
/A	
	,

The date of each amendment(s) ado date this document was signed.	ption:	, if other than the
_		
Effective date if applicable:	(no more than 90 days after amendment file date)	<del></del>
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopty 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)	
	(voting group)	
The amendment(s) was/were adopt action was not required.	ted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopaction was not required.	ted by the incorporators without shareholder action and shareholder	
Dated	V 22, 13	
Signature	22, 13 Of Hell	
(By a dire	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)	
A	Ashley Halley	
<del>-</del>	(Typed or printed name of person signing)	<del></del>
F	President	
<del>-</del>	(Title of person signing)	<del></del>