

PO9000015699

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

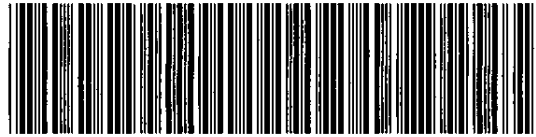
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/15/09--01021--023 **43.75

FILED
09 MAY - 6 PM 3:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AMEND
KRC
6/18

May 4, 2009

Amendment Section
Divisions Of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Attn: Irene Allbritten

Dear Ms. Allbritten:

Attached please find the a new set of Corporations Documents as Requested by your office since your office had mailed back to me The original set and was never received since your office sent them To the wrong address.

According to the person I spoke to I was told that the only thing That was missing was the date.

If you could please expedite these documents as soon as possible Since our Merchant Bank is waiting for the Amendment to be Process in order to have my company up and running.

Thank you for your immediate attention to this request. If you have Any questions please do not hesitate to contact me at any time.

Sincerely,

Fernando Galvez
President
Vida Natural Laboratorios, Inc.

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Vida Natural Laboratories, Inc.

DOCUMENT NUMBER: P09000015699

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Fernando Galvez
Name of Contact Person

Vida Natural Laboratories, Inc.
Firm/ Company

12786 NW 98 place
Address

Hialeah Gardens, FL 33018
City/ State and Zip Code

gabrielaronald@hotmail.com (wife)
Email address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Fernando Galvez at (786) 426-6584
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:

☐ \$35 Filing Fee

☒ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Vida Natural Laboratories, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

909000015699

(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:

same

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 "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)

same

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

same

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:

same

New Registered Office Address:

(Florida street address)

(City), Florida
(Zip Code)

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

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TALLAHASSEE, FLORIDA

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>	<u>Address</u>	<u>Type of Action</u>
Vp	Carlos Galvez	12786 NW 98 Pl Hialeah Gardens Florida 33018	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

N/A

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

N/A

The date of each amendment(s) adoption: 4/20/2009
Effective date if applicable: 4/20/2009
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☒ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 4/13/2009.

Signature x Fernando Galvez
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Fernando Galvez
(Typed or printed name of person signing)
President
(Title of person signing)