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(Requ	uestor's Name)	
(Addi	ess)	
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(City/	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nan	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi Ed Win C Advisual The Name Name Ch	ling Officer: XJAVO HOLL JAVO X FU	mond mund myhe cla

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

Amendicus Monpolio

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: NUEVA VIDA - NATURA	L PRODUCTS INC.
DOCUMENT NUMBER: <u>P09000068672</u>	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Edwin BEJARANO Name of Contact Person	
Name of Contact Person NOEVA VIDA - NATURAL PR Firm/ Company	ODUCTS INC.
3113 NW 25TH AVE	!
POMPANO BEACH, FL 3306 City/ State and Zip Code	9
LIFEISHEALTHY OLIVE. CO	
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:	
Edwin BEJARANO at (754) 422- Name of Contact Person Area Code & Daytime To	7011
Name of Contact Person Area Code & Daytime To	elephone Number
Enclosed is a check for the following amount made payable to the Florida Depa	ertment of State:
□\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Street Address	1
Amendment Section Amendment Section	
Division of Corporations Division of Corporations Division of Corporations	
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circ	-1-

Tallahassee, FL 32301

Articles of Amendment

to Articles of Incorporation of

NUEVA VIDA - NATURAL PRODUCTS INC.
(Name of Corporation as currently filed with the Florida Dept. of State)
P09000068672
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the followamendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
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) POMPANO BEACH, FL 33069
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Pompano Beach, FL 33069
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: Edwin BEJARANO 3113 NW 25 TH AVE
New Registered Office Address: (Florida street address)
POMPANO BEACH, Florida 33069 (City) (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

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>	Name	<u>Address</u>	Type of Action
<u>P</u>	ERICK A BEJARANO	1006 ISLAND MANOR DR. WEST PALMBEACH, F133413	☐ Add ☐ Remove
P	Edwin BEJARAND	3113 NW 25 TH AVE POMPANO BEACH, FL 33069	☑ Add ☐ Remove
	· · · · · · · · · · · · · · · · · · ·		☐ Add ☐ Remove
	or adding additional Articles, enter clonal sheets, if necessary). (Be specific		
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•		,	
 			
provisions	dment provides for an exchange, reclasion for implementing the amendment if no pplicable, indicate N/A)		
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	••		

The date of each amendment		
Effective date if applicable:	(date of adoption is required)	
The Colon Co	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendere sufficient for approval.	dment(
	re approved by the shareholders through voting groups. The following d 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 same of the sa	(voing group)	
action was not required. The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareho	lder
Dated	7/15/10	
Signature <u>(</u>	antin	
sele	a director, president or other officer – if directors or officers have not be cted, by an incorporator – if in the hands of a receiver, trustee, or other ointed fiduciary by that fiduciary)	
	Edwin BEJARAND	
May be a server of the server	(Typed or printed name of person signing)	
The state of the s	\mathcal{P}	
	(Title of person signing)	