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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filina Officer:	
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORI	PORATION: Braun H	loward, Inc.	•		
DOCUMENT NU	MBER:P100000320	088	<u>.</u>		
The enclosed Artic	cles of Amendment and fee an	re submitted for filing.			
Please return all co	orrespondence concerning this	s matter to the following:			
	R. Carlton W	Vard ame of Contact Person			
	Richards Gilkey,	, Fite, Slaughter, Pratesi Firm/Company	& Ward, PA		
	1253 Park Street				
		Address			
	Clearwater, FI	2 33756 htty/ State and Zip Code			
	E-mail address: (to be used	d for future annual report notification)			
For further informa	ation concerning this matter,	please call:			
R. Carlton Ward Name of Contact Person		at (727) 443-3281 Area Code & Daytime Tele	at (<u>727</u>) <u>443-3281</u> Area Code & Daytime Telephone Number		
Enclosed is a check	k for the following amount m	ade payable to the Florida Depart	ment of State:		
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
P.O. Box 6	nt Section Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	e		

Articles of Amendment

to

^ Articles	to of Incorporat	ion	1777
• '	of		10 MAY LED
Braun Howard, Inc. (Name of Corporation as currently file	ed with the Flor	ida Dept. of S	10 MAY 27 AM 9: 18
P10000032088			ASSEE FISHING
(Document Number of C	Corporation (if kr	nown)	CATOA
ursuant to the provisions of section 607.1006, Florid nendment(s) to its Articles of Incorporation:	la Statutes, this	Florida Profii	t Corporation adopts the follow
. If amending name, enter the new name of the cor	poration:		
Braun Health Inc			The new
Braun Health, Inc. ame must be distinguishable and contain the word bbreviation "Corp.," "Inc.," or Co.," or the designation ame must contain the word "chartered," "professional	tion "Corp," "I	nc," or "Co".	A professional corporation
. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDI	RESS)	N/A	<u> </u>
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	 0	N/A	A
. If amending the registered agent and/or registere new registered agent and/or the new registered of Name of New Registered Agent:		in Florida, er	nter the name of the
Name of New Registerea Agent:	N/A		
New Registered Office Address:	(Florida stree	t address)	_
	(City)	(2	, Florida Zip Code)
ew Registered Agent's Signature, if changing Registhereby accept the appointment as registered agent. I		a and accept th	ne obligations of the position.
Signature	of New Register	red Agent, if ch	hanging

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)

Title Name | Address Type of Action 8439 Riverside Dr NE Nicole Howard ☐ Add St. Petersburg, FI 33702 Remove
 Re 620 Belle Isle Ave Add P/S___ Melissa Braun Belleair Beach, FL 33786 ☐ Remove VP/T Drew Braun 620 Belle Isle Ave Add Remove Belleair Beach, FL 33786 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)

The date of each amendment	t(s) adoption: May 21, 2010
Effective date if applicable:	(date of adoption is required) N/A
· · ·	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	are approved by the shareholders through voting groups. The following statement of 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)
	(romag growp)
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated	5/21/2mp
Signature (By	a director, president of other officer - if directors or officers have not been
sele	ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	CAR LTON WARD
	(Typed or printed name of person signing)
	(Title of person signing)
	(Title of person signing)