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JALLAHLASSEE, FLORIDA

JUN 06 2018

S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	ON: LIGHTWORM PR	ODUCTIONS, INC.	· · · · · · · · · · · · · · · · · · ·	
DOCUMENT NUMBER:	P10000013358			
The enclosed Articles of Art	nendment and fee are sub	omitted for filing.		
Please return all correspond	ence concerning this mat	ter to the following:		
EDU	JARDO CHACON			
		Name of Contact Person]	
LIG	LIGHTWORM PRODUCTIONS, INC			
		Firm/ Company	***************************************	
7649	TAMARAC ISLAND C	CIRCLE		
	Address			
TAN	MARAC, FL 33321			
		City/ State and Zip Code	:	
FC@FDU	ARDOCHACON.COM			
		ed for future annual report	notification)	
For further information con	cerning this matter, please		344-7957	
Name of Contact Person		at (Area Co	de & Daytime Felephone Number	
Enclosed is a check for the			•	
□ \$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		Amend	Address ment Section on of Corporations Building	

Articles of Amendment to Articles of Incorporation of

LIGHTWORM PRODUCTIONS, INC.		
(Name of Corporation as curre	ntly filed with the Florida Dept. of State)
P10000043358		
(Document Number	r of Corporation (it known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, the its Articles of Incorporation:	nis <i>Florida Profu Corporation</i> adopts the f	following amendment(s) to
A. If amending name, enter the new name of the corporation:		
FITNESS CONTINUUM, INC.		The new
name must be distinguishable and contain the word "corporal" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or word "chartered," "professional association," or the abbreviation	r "Co". A protessional corporation name	
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS)		≥
C. Enter new mailing address, if applicable:	N/A	HESSE
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
		\$ <u>13</u>
D. If amending the registered agent and/or registered office ac new registered agent and/or the new registered office address		
Name of New Registered Agent N/A		
Name of New Kegimerea Agent		
(Florida	street address.	
N/A		
New Registered Office Address:		(Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia		estion
Signature of New	v 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)

Frample

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 = Chairmon or Clerk; CEO = ChiefExecutive 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 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: <u>X</u> Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) N/A Change	N/A	N/A	N/A
N/A Add			N/A
N/A Remove			N/A
2) N/A Change	N/A	N/A	N/A
N/A Add			N/A
N/A Remove			N/A
3) N/A Change	N/A	N/A	N/A
N/A Add			N/A
N/A Remove			N/A
4) N/A Change	N/A	N/A	N/A
N/A Add			N/A
N/A Remove			N/A
5) N/A Change	N/A	N/A	N/A
N/A Add		-	N/A
N/A Remove			N/A
6) N/A Change	N/A	N/A	N/A
N/A Add			N/A
N/A Remove			N/A

E. If amending or adding additional At (Attach additional sheets, if necessary)). (Be specific)
N/A	
1.1.1	
F. If an amendment provides for an ex	vchange, reclassification, or cancellation of issued shares.
provisions for implementing the an (if not applicable, indicate N/A)	mendment if not contained in the amendment itself:
N/A	,
<u></u>	

•	N/A	
The date of each amendment(s) adopt date this document was signed.	ion:	, if other than the
N/A		
Effective date if applicable:		
	(no more than 90 days after amendment file c	late)
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory (ting requirer ment of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the shareholders was/were suffici	by the shareholders. The number of votes cast for the ent for approval.	amendment(s)
	ed by the shareholders through voting groups. The follow the voting group entitled to vote separately on the amena	
	he amendment(s) was/were sufficient for approval	
by	<u>.</u> "	
77	(voting group)	
_	by the board of directors without shareholder action as	nd shareholder
☐ The amendment(s) was/were adopted action was not required.	d by the incorporators without shareholder action and sl	nareholder
Dated TAY 3	or, president or other officer – if directors or officers ha	
	r an incorporator – if in the hands of a receiver, trustee.	
	iduciary by that fiduciary)	or other court
пручиней і	\	
E	EXAPTO CHACON	
	(Typed or printed name of person signing)	
	Phospert	
	(Title of person signing)	_