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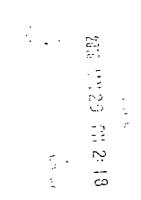
| (Requestor's Name) | |
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| (Address) | |
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| (City/State/Zip/Phone #) | |
| PICK-UP WAIT | MAIL |
| (Business Entity Name) | |
| (Document Number) | |
| Certified Copies Certificates of St | atus |
| Special Instructions to Filing Officer: | |
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Office Use Only



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C GOUDEN

COVER LETTER

| TO: Amendment Section Division of Corporations | | |
|--|--|---------|
| NAME OF CORPORATION: | Bella Prana Yoga & Meditale | ion Inc |
| DOCUMENT NUMBER:P | 10000049336 | |
| The enclosed Articles of Amendment | and fee are submitted for filling. | |
| Please return all correspondence conce | erning this matter to the following: | |
| E-mail add | Pari Sloman Name of Contact Person Bella Hrana Yoga Firm/ Company 126 W. Jean St. Address Tampa FC. 33604 City/ State and Zip Code Vani & bella prana. Com dress: (to be used for future annual report notification) | |
| For further information concerning this Name of Contact Person | man at (813), 407-2140 | - |
| Enclosed is a check for the following a | amount made payable to the Florida Department of State: | |
| _ | Filing Fee & Status Status Status Status Certified Copy Cadditional Copy Cadditional Copy Certified Copy Cadditional Copy Certified Copy Ce | |
| Mailing Address Amendment Section | Street Address Amendment Section | |

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

| "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the | "Inc," or "Co", A profi abbreviation "P.A." | essional corporation name | must contain the |
|---|---|---------------------------|------------------|
| B. Enter new principal office address, if applicable Principal office address MUST BE A STREET ADD | | | |
| rrincipal affice address <u>most be A STREET ADD</u> | | <u></u> | |
| | | | |
| C. Enter new mailing address, if applicable: | | | |
| (Mailing address MAY BE A POST OFFICE BO. | <u>X</u>) | | |
| | , | | |
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| | | | |
| D. If amending the registered agent and/or register | <u>ed office address in Florid</u> office address: | a, enter the name of the | |
| | Ullice Addi C55, | | |
| new registered agent and/or the new registered | | | |
| Name of New Registered Agent | | | |
| | | | |
| | (Florida street uddress) | | |
| | | . Florida | |

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 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 | PT John Doe | |
|---|---|---------------------------|
| X Remove | <u>V</u> <u>Mike Jones</u> | |
| X Add | SV Sally Smith | |
| Type of Action (Check One) 1) Change Add | S Ting Tidwell Bedore 2801 N. Mc Tampa, Fr. | <u>irg</u> an St 33600 |
| Remove 2) Change Add | T Griselda Colucci 35 Aegean An Tampa, Fc. 3 | — (C. 33606 |
| Remove 3) Change Add | | |
| Remove 4) Change Add | | |
| Remove 5) Change Add | | <u> </u> |
| Remove 6) Change Add Remove | | |

| amending or adding additional Arti- ttach additional sheets, if necessary). | (Be specific) | | |
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| an amendment provides for an exch | ange, reclassification, or c | ancellation of issued sn | ares, |
| provisions for implementing the amer | <u>idment if not contained in </u> | the amendment itself: | |
| (if not applicable, indicate N/A) | ndment if not contained in | the amendment itseit: | |
| rovisions for implementing the amei | ndment if not contained in | the amendment itself: | |
| provisions for implementing the amer | ndment if not contained in | ine amendment itseit: | |
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| provisions for implementing the amer | ndment if not contained in | The amendment itself: | |

| | Date this document is sign | ed please |
|--|---|------------------|
| The date of each amendment(s) ado date this document was signed. | ption: | f other than the |
| Effective date <u>if applicable</u> : | | |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this blo document's effective date on the Department. | ock does not meet the applicable statutory filing requirements, this date will not artment of State's records. | be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| The amendment(s) was/were adopt by the shareholders was/were suffi | ted by the shareholders. The number of votes east 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 adopt action was not required. | ted by the incorporators without shareholder action and shareholder | |
| Dated 01 | 24/2018 | |
| S: | | |
| | 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) | |
| | RONI SLOMAN | |
| | (Typed or printed name of person signing) | |
| _ | PRESIDENT (Title of person signing) | |