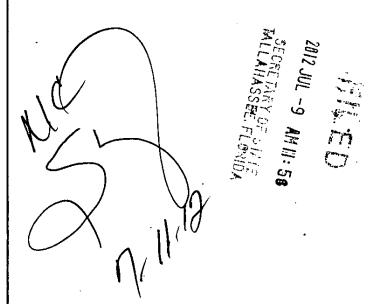
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### **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: HEALTHY LIFE WITH 4 LIFE, INC. DOCUMENT NUMBER: P10000062793 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: HILDA C BROWN 14809 SW 176 TERR Address MIAMI, FL 33187 City/ State and Zip Code ncsfinancial@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: **HILDA BROWN** Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed)

**Mailing Address** 

CONTRACTOR SERVICE

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

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# HEALTHY LIFE WITH 4 LIFE INC

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

# P 10000062793

(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:

ame must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation " ord "chartered," "professional association," o	"Corp," "Inc," or "Co". A pro	ny," or "incorpoi fessional corporai	rated" or the abbre tion name must cont
Enter new principal office address, if appli Principal office address <u>MUST BE A STREET</u>			
Enter new mailing address, if applicable:			<del></del>
(Mailing address <u>MAY BE A POST OFFIC</u>	<u> </u>		
If amending the registered agent and/or re new registered agent and/or the new regist	egistered office address in Flori tered office address:		e of the
If amending the registered agent and/or re	egistered office address in Flori tered office address:		e of the
If amending the registered agent and/or re new registered agent and/or the new regist	egistered office address in Flori tered office address:		e of the
If amending the registered agent and/or re new registered agent and/or the new regist	egistered office address in Flori tered office address: (Florida street address)		

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	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	*****	_		
Add Remove				
2) Change Add		_		
Remove				
3 ) Change Add Remove		<del></del>	· · · · · · · · · · · · · · · · · · ·	
			•	
4) Change Add Remove			1	
Kemove				
5) Change Add		_		
Remove				
6) Change		_		
Add Remove				

E. If amending or additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
ARTICLE IX
AMENDING NEW NAME OF CORPORATION
HILDA BROWN 4 LIFE, INC
·
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(s) adoption of Amendment(s)	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(no more than 90 days after amenament file date)
Adoption of Amendment(s)	(CHECK ONE)
	( <u>CHECK ONE</u> )
The amendment(s) was/were adopt by the shareholders was/were suffi	red by the shareholders. The number of votes cast 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	r the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.	ted by the board of directors without shareholder action and shareholder ted by the incorporators without shareholder action and shareholder
Dated	5/12
selected,	by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)
арроппес	Hilda C. Brown
_	(Typed or printed name of person signing)
_	(Title of berson signing)