P. 001

Page 1 of 1

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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mail	Address:								

COR AMND/RESTATE/CORRECT OR O/D RESIGN HERA'S WELLNESS CENTER, INC.

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

Articles of Amendment

to

Articles of Incorporation

•	of	****			•		
HERA'S WELLNESS	CENTER	R, INC					
(Name of Corporation as currently filed with the Florida Dept. of State)							
P10000063216							
(Document Number of C	orporation (if	(knowu)					
Pursuant to the provisions of section 607.1006, Florida amendment(s) to its Articles of Incorporation:	a Statutes, th	is <i>Florida</i> .	Profit Cor	p <i>oration</i> ad	opts the follo	antwo	
A. If amending name, enter the new name of the corp	poration:						
MIAMI WELLNESS	CENTER,	INC.			The new		
name must be distinguishable and contain the word abbreviation "Corp.," "Inc.," or Co.," or the designat name must contain the word "chartered," "professional	tion "Corp,"	"Inc," or "	Co". A p	rofessional	red" or the corporation		
B. Enter new principal office address, if applicable:	<u> </u>		,	4			
(Principal office address <u>MUST BE A STREET ADDR</u>	ESS)			ĬĄ.	SE 🚆	•	
	,			A			
				- S	3	! :	
C. Enter new mailing address, if applicable:				in a	\$ -D ⊞	-	
(Mailing address MAY BE A POST OFFICE BOX)				770		•	
				<u>></u>	; 		
•					<u></u>	٠.	
D. If amending the registered agent and/or registered new registered agent and/or the new registered off			la, enter t	he name of	<u>the</u>	•	
	ice actoress.						
Name of New Registered Agent:					•		
· · · · · · · · · · · · · · · · · · ·		······································	•				
New Registered Office Address:	(Florida stre	eet address)					
				lorida			
• •	(City)		(Zip Co	de)			
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I am	<mark>ered Agent:</mark> m familiar wi	ith and acce	pt the obli	gations of th	e position.		
-		, , , ,					
Signature of	of New Record	ered Agent	if changin	7			

<u> Cirle</u>	<u>Name</u>	Address	Type of Actio
			D Add
	,		DAdd
			Remove
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		'	[] Remove
	iding or adding additional Articles		
(attach d	additional sheets, if necessary). (H	le specific)	
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	<u> </u>	·	· · · · · · · · · · · · · · · · · · ·
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. Yfan a	mendment provides for an exchan	ge, reclassification, or cancells	ition of issued shares.
provis	ions for implementing the amendo	ent if not contained in the am	endment itself:
(if i	not applicable, indicate N/A)		
		·	
	<u></u>		
			•

Effective date if applicable:	(a) adoption: MOS. 01, 2010 (date of adoption is required)
	(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 east for the amendment(s' ere sufficient for approval.
	re 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	east for the amendment(s) was/were sufficient for approval
· by	,
	(voting group)
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/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated_AUG	. 07, 2010
Signature _	Destettous
	a director, president or other officer – if directors or officers have not been
	cted, by an incorporator — if in the hands of a receiver, trustee, or other court pinted fiduciary by that fiduciary)
	CASTELLANOS, ILIANA
•	(Typed or printed name of person signing)
•	P/D
	(Title of person signing)