

P11000008104

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
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7/26/11  
TC

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: GET A LIFE CORPORATION

DOCUMENT NUMBER: P11000008104

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Tonya Fuentes

Name of Contact Person

Firm/ Company

P.O. Box 236816

Address

Cocoa, FL 32923

City/ State and Zip Code

mrec2011@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tonya Fuentes

Name of Contact Person

at ( 321 )

271-5226

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$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

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Articles of Amendment  
to  
Articles of Incorporation  
of

GET A LIFE CORPORATION

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

P11000008104

(Document Number of Corporation (if known))

APPROVED  
FILED  
11 JUL 25 PM 2:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable:**  
(Principal office address **MUST BE A STREET ADDRESS**)

4399 35th Street N.

St. Petersburg, FL 33714

**C. Enter new mailing address, if applicable:**  
(Mailing address **MAY BE A POST OFFICE BOX**)

P.O. Box 236816

Cocoa, FL 32923

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent:

Tonya Fuentes

New Registered Office Address:

4399 35th Street N.

(Florida street address)

St. Petersburg


(City)

Florida 33714

(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

  
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)*

| <u>Title</u> | <u>Name</u>                 | <u>Address</u>  | <u>Type of Action</u>  |
|--------------|-----------------------------|---|--|
| <u>D</u>     | <u>Tonya Fuentes</u>        | <u>4399 35th Street N.</u><br><u>St. Petersburg, FL 33714</u> | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove |
| <u>D</u>     | <u>Mo S. Jiwani</u>         | <u>4399 35th Street N.</u><br><u>St. Petersburg, FL 33714</u> | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove |
| <u>D</u>     | <u>Bryan W. Bettencourt</u> | <u>4399 35th Street N.</u><br><u>St. Petersburg, FL 33714</u> | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove |

**E. If amending or adding additional Articles, enter change(s) here:**

*(attach additional sheets, if necessary). (Be specific)*

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**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)*

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The date of each amendment(s) adoption: July 21, 2011  
(date of adoption is required)  
Effective date if applicable: July 21, 2011  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided 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)

☒ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated July 21, 2011

Signature \_\_\_\_\_

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Tonya Fuentes

(Typed or printed name of person signing)

Director

(Title of person signing)