

P110000051443

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

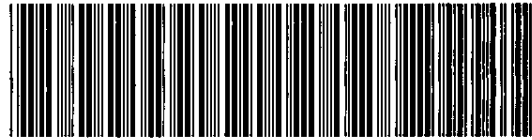
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/12/11--01025--021 **52.50

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 DEC 21 PM 2:40

Amend
cc/ays
@ 12/21/11

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Sutra Wellness, Inc
DOCUMENT NUMBER: P11000051443

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

Please return all correspondence concerning this matter to the following:

Megan Haligowski
Name of Contact Person
Sutra Wellness
Firm/ Company
310 SE 4th Ave
Address
Delray FL 33483
City/ State and Zip Code
MEGAN@SutraYoga.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Megan Haligowski at (921) 703 0872
Name of Contact Person Area Code & Daytime Telephone Number

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

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input checked="" type="checkbox"/> \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 13, 2011

MEGAN HALIGOWSKI
SUTRAWELLNESS, INC.
310 SE 4TH AVE
DELRAY, FL 33483

SUBJECT: SUTRAWELLNESS, INC.
Ref. Number: P11000051443

We have received your document for SUTRAWELLNESS, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

YOU FAILED TO SIGN THE DOCUMENT.

The name and title of the person signing the document must be noted beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 011A00027778

RECEIVED
11 DEC 21 AM 10:51
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

Sutro Wellness, Inc
(Name of Corporation as currently filed with the Florida Dept. of State)

711000051443
(Document Number of Corporation (if known))

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 DEC 21 PM 2:40

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: N/A

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)

310 SE 4th Ave
Delray Beach, FL 33483

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

310 SE 4th Ave
Delray Beach, FL 33483

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:

MEGAN HALIGOWSKI
310 SE 4th Ave, Delray Beach, FL 33483
(Florida street address)

New Registered Office Address: Delray Beach, Florida 33483
(City) (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.

M. Haligowski
Signature of New Registered Agent, if changing

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

| <u>Title(s)</u> | <u>Name</u> | <u>Address</u> |
|-----------------|-------------------------|---|
| 1) <u>P</u> | <u>MEGAN HALIGOWSKI</u> | <u>310 SE 4th Ave</u> <u>Delray Bch, FL 33483</u> |
| 2) _____ | _____ | _____ _____ _____ |
| 3) _____ | _____ | _____ _____ _____ |
| 4) _____ | _____ | _____ _____ _____ |
| 5) _____ | _____ | _____ _____ _____ |
| 6) _____ | _____ | _____ _____ _____ |

If REMOVING an officer and/or director, please list the title(s) and name of the officer/director to be removed:

| <u>Title(s)</u> | <u>Name</u> | <u>Title(s)</u> | <u>Name</u> |
|-----------------|---------------------|-----------------|-------------|
| 1) <u>P</u> | <u>Susan Mencia</u> | 4) _____ | _____ |
| 2) _____ | _____ | 5) _____ | _____ |
| 3) _____ | _____ | 6) _____ | _____ |

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There is no text or other markings on the paper.

- 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: 12/6/2011

Effective date if applicable: 12/6/2011
(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 12/19/2011

Signature Megan Haligowski
(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)

Megan Haligowski
(Typed or printed name of person signing)
Vice President
(Title of person signing)