P110000080330

Office Use Only



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2011 DEC 16 AM 11: 54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend
Braun 12-1611

COVER LETTÉR

TO: Amendment Section **Division of Corporations** NAME OF CORPORATION: <u>Liverside</u> wellness Center one P11000080330 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Rivuside Wellness Centur and
Firm/Company 7911 NW 72 ave + 114 Medley R 33166 E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 6e0/gc Nod/19412 at (305) 525 7954

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: \$35 Filing Fee ☐ \$43.75 Filing Fee & \$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section Division of Corporations **Division of Corporations**

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

Articles of Amendment Articles of Incorporation

| 21 | 1100 | KED |
|---------------------------|--------|-----------------------------|
| TALLA | EDO. | AMII: SA |
| MC ["] State) | - SEE. | AMII: SA CORIOA |
| | | $\mathcal{M}_{\mathcal{Q}}$ |

(Zip Code)

P 11 000080330
(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:

| A. If amending name, enter the new name of t | the corporation | <u>ı:</u> | |
|---|-----------------|---------------------------|------------------------|
| The new name must be distinguishable and "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name association," or the abbreviation "P.A." | "Inc.," or Co., | " or the designation "C | Corp," "Inc," or |
| B. Enter new principal office address, if appli Principal office address <u>MUST BE A STREET</u> | | 7911 NW 7 Medley, R | 2 avr +114 2 33166 |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE | (E BOX) | 7911 NW 7 Medley, R | 2 avr + 114 33164. |
| D. If amending the registered agent and/or renew registered agent and/or the new registered. | | | er the name of the |
| | | Nodriguez N 72 ave + | _ <u> </u> 114 |
| New Registered Office Address: | (Florid | da street address) l W | . Florida <i>331UU</i> |

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

(City)

Page 1 of 4

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.)

| Title(s) | Name | Addre | <u> </u> |
|-------------------------|-----------------------------------|---------------------------|---------------------------------|
| 1) | beorge lodrigue | 12 7911 N Healey, | w 72 ave * 114 12 33144 |
| 2) | | | |
| 3) | | | |
| 4) | | - | |
| 5) | | | |
| 6) | • | | |
| If REMOVING an removed: | officer and/or director, please l | list the title(s) and nam | e of the officer/director to be |
| Title(s) | Name | Title(s) | <u>Name</u> |
| 1) <u></u> | George lodriques or | | |
| 2) | TIMICALL, IC DOIL | 5) | |
| 3) | | 6) | |

| If amending or adding additional A attach additional sheets, if necessary). | |
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| provisions for implementing the am | change, reclassification, or cancellation of issued share endment if not contained in the amendment itself: |
| If an amendment provides for an exprovisions for implementing the ame (if not applicable, indicate N/A) | change, reclassification, or cancellation of issued share endment if not contained in the amendment itself: |
| provisions for implementing the am | change, reclassification, or cancellation of issued share endment if not contained in the amendment itself: |
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| provisions for implementing the am | change, reclassification, or cancellation of issued share endment if not contained in the amendment itself: |

| The date of each amendment(s) ad | |
|---|--|
| Effective date if applicable: | (date of adoption - required) |
| (no | more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| Adoption of Amendment(s) | (CHECK ONE) |
| The amendment(s) was/were add by the shareholders was/were su | opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval. |
| | proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s): |
| "The number of votes cast for | or the amendment(s) was/were sufficient for approval |
| by | ," |
| (voti) | ng group) ." |
| The amendment(s) was/were ado action was not required. | pted by the board of directors without shareholder action and shareholder |
| The amendment(s) was/were ado action was not required. | pted by the incorporators without shareholder action and shareholder |
| Dated <i>l</i> | 17/11 |
| selected, | 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 if fiduciary by that fiduciary) |
| | George Rodrigutt (Typed ordrinted name of parson signing) |
| | (Title of person signing) |