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COVER LETTER

TO: Amendment Section

Division of Corpo	orations		•
NAME OF CORPOR	RATION: JLS Nutritio	on, Inc.	
	BER: P1100009571		
DOCUMENT NUMI	BER:		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Sean McCoy		
		Name of Contact Person	1
	JLS Nutrition, Inc		
	44404.01.1.10	Firm/ Company	
	11161 State Roa		
	Bradenton, Florid	Address	
	Braderitori, Florid	City/ State and Zip Code	<u></u>
			
	Seanmac	293 @q. maj sed for future amual report	notification)
	D-man address. (to be us	sed for future annual report	nonneation
For further information	n concerning this matter, pleas	se call:	
Sean McCoy		at (941	524-5161 de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment 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)
	ling Address		Address
	endment Section sion of Corporations	Amendment Section Division of Corporations	
P.O. Box 6327		Clifton Building	

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

JLS Nutrition, Inc.				_
(Name of Corporation as currently file	ed with the Florid	a Dept. of State)		
P11000095715				_
(Document Number of C	Corporation (if kno	wn)		
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Flori	da Profit Corporation ad	opts the followin	g amendment(s) to
A. If amending name, enter the new name of the cor	rporation:			
	= =			_The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp,' word "chartered," "professional association," or the a	" "Inc," or "Co".	A professional corpora	rated" or the a tion name must	bbreviation contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDI				-
				_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	Ø			· ·
		<u>i,i,_i,_i</u>		_
D. If amending the registered agent and/or registered	— ed office address i	n Florida, enter the nam	e of the	-
new registered agent and/or the new registered o	ffice address:			
Name of New Registered Agent				2 HAT
<u></u>	(Florida street ac	idress)		216 975 975 975 975
New Registered Office Address:		, Florida		_ B
New Registered Office Address.	(City)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Zip Code)	3: 26
New Registered Agent's Signature, if changing Registereby accept the appointment as registered agent. I		and accept the obligations	of the position.	·&
Si	n Baninton-J 42	if changing		
Signature of Nev	v Registered Ageni	, y cnanging		

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 Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	Director	John Visali	11161 S.R. 70 East Bradenton, Florida 34202
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove	 		
5) Change Add Remove			
6) Change Add Remove			

tach additional sheets, if necessary).	(Be specific)
	
an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
rovisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(y noi applicable, maicale WA)	

The date of each amendment(s) a	doption: March 1, 2012
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were adby the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes cast	t for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were adaction was not required.	opted by the board of directors without shareholder action and shareholder
The amendment(s) was/were adaction was not required.	opted by the incorporators without shareholder action and shareholder
Dated	ruh 9, 3012
	A. MM
Signature	director, president or other officer - if directors or officers have not been
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court
	nted fiduciary by that fiduciary)
	Sean McCoy
	(Typed or printed name of person signing)
	Director
	(Title of percon cioning)