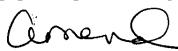
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(Reques	tor's Name)	<u> </u>
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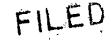
1/10/12

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Health & W	/ellness Online,	Inc.
DOCUMENT NUME	BER: P1100010031	0	
	of Amendment and fee are su		
Please return all corres	spondence concerning this ma	tter to the following:	
	Drew Nederpelt		
	Name of Contact Person		
	Health & Wellnes	s Network, Inc	
		Firm/ Company	*
	1776 11th Ave N	, cep,	
		Address	
	St. Petersburg, F	I 33713	
		City/ State and Zip Code	2
Cor	ntact@hwchannel	l.com	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Drew Nederpelt		at (800	, 560-5148
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:
□ \$35 Fiting Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is	S52.50 Filing Fee Certificate of Status Certified Copy
	enclosed)	(Additional C	opy is enclosed)
			is cheroscay
Mailing Address			Address
Amendment Section		Amendment Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle	
1 4116	1 1 0 m 0 1 1 1 m 1 1 1 1 m 1 1 1 1 m 1 1 1 1		ssee, FL 32301

Articles of Amendment to **Articles of Incorporation** of



Health & Wellness Online, Inc.

2012 JAN -6 AM 10: 59

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

ent(s) to

7 1000 1003 0		Incari.
(Documer	nt Number of Corporation (if known)	The Carte of the C
ursuant to the provisions of section 607. s Articles of Incorporation:	1006, Florida Statutes, this <i>Florida Profit</i>	Corporation adopts the following amen
If amending name, enter the new na	me of the corporation:	
		The
	tain the word "corporation," "company ation "Corp," "Inc," or "Co". A profe tion," or the abbreviation "P.A."	
Enter new principal office address, rincipal office address MUST BE A S		
Enter new mailing address, if appli		
(Mailing address <u>MAY BE A POST</u>)	OFFICE BOX)	
16 di dhi-dd	d/a mariatana da 60 a addusa in Dianida	
new registered agent and/or the nev	<u>d/or registered office address in Florida v registered office address:</u>	, enter the name of the
Name of New Registered Agent	Health & Wellness Netwo	ork, Inc.
	1776 11th Ave N	
	(Florida street address)	<u></u>
New Registered Office Address:	St. Petersburg	, Florida 33713
	(City)	(Zip Code)
ew Registered Agent's Signature/if cl	nanging Registered Agent:	
ereby accept the appointment as legist		t the obligations of the position.
Sig	mature of New Registered Agent, if chang	ing

Page 1 of 4

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: XChange	PT John	n Doe	
X Remove	<u>V</u> <u>Mik</u>	ce Jones	
_X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change Add Remove	D	Drew Nederpelt	3580 Belle Vista Dr St. Pete Beach, Fl 33706
2) Change Add Remove	V	Randy Gruber	2310 39th Ave N St. Petersburg, Fl 33714
3) Change Add Remove		· · · · · · · · · · · · · · · · · · ·	
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

(attach additional sheets, if necessary). (Be specific)
Changing Drew Nederpelt to Director, Adding Randy Gruber as Vice
President for the purpose of two signatures for Stock Certificate
and for other business as necessary. Listing parent company as
registered agent of this corporation.
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)
Single Share of stock will be issued to parent company (Health &
Wellness Network, Inc.). Certificate and entry into stock ledger
will be held on the books of Health & Wellness Network, Inc.

The date of each amendment(s) adop	tion: 1/3/2012
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 adopte by the shareholders was/were suffice	d by the shareholders. The number of votes cast for the amendment(s) ient for approval.
	yed by the shareholders through voting groups. The following statement ch 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 adopte action was not required.	d by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopte action was not required.	d by the incorporators without shareholder action and shareholder
Dated 1/3/2012	
Signature	etor, president or other officer – if directors or officers have not been
selected, b	y an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)
	rew Nederpelt
·	(Typed or printed name of person signing)
С	EO / Owner
	(Title of person signing)