

P11000100311

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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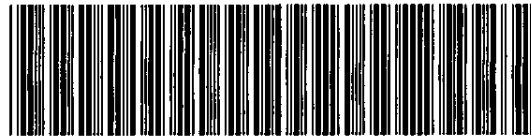
(Business Entity Name)

(Document Number)

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Amend

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2012 JAN -6 AM 10:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DR
1/10/12

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Health & Wellness Marketplace, Inc.

DOCUMENT NUMBER: P11000100311

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

Please return all correspondence concerning this matter to the following:

Drew Nederpelt

Name of Contact Person

Health & Wellness Network, Inc

Firm/ Company

1776 11th Ave N

Address

St. Petersburg, FL 33713

City/ State and Zip Code

Contact@hwchannel.com

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

For further information concerning this matter, please call:

Drew Nederpelt

Name of Contact Person

at (800) 560-5148

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

enclosed)

☐ \$43.75 Filing Fee &
Certified Copy

(Additional copy is

(Additional Copy

☒ \$52.50 Filing Fee

Certificate of Status

Certified 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

FILED

2012 JAN -6 AM 10:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Health & Wellness Marketplace, Inc.

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

P11000100311

(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 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**)

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

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 Health & Wellness Network, Inc.

1776 11th Ave N

(Florida street address)

New Registered Office Address: St. Petersburg, Florida 33713

(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.

Signature of New Registered Agent, if changing

(Attach additional sheets, if necessary)

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.

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>

Address

3580 Belle Vista Dr
St. Pete Beach, FL 33706

2310 39th Ave N
St. Petersburg, Fl 33714

0 10 20 30 40 50 60 70 80 90 100

E. If amending or adding additional Articles, enter change(s) here:
(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) adoption: 1/3/2012

Effective date if applicable: _____
(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 1/3/2012

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)

Drew Nederpelt

(Typed or printed name of person signing)

CEO / Owner / Director

(Title of person signing)