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COVER LETTER

TO:	Amendment Section		
	Division of Corporations		

NAME OF CORPORATION:	PHYSICAL 4U, INC.
DOCUMENT NUMBER:	P11000108888

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

Please return all correspondence concerning this matter to the following:

KODPIGUEZ_____ Name of Contact Person CAL 4U INC Firm/ Company 60 AVENUE 220 Address City/ State and Zip Code equail. COM Ļ (to be used for future annual report notification)

For further information concerning this matter, please call:

786 <u>366</u> 1036 Area Code & Daytime Telephone Number 21 at (_ T. Name of Contact Person

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



□\$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)

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 An	nendment
to Articles of Inco	orporation
Thysical	TU INC.
(<u>Name of Corporation as currently</u>	y filed with the Florida Dept. of State)
P[100	0108880
	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this I is Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
 If amending name, enter the new name of the corporation: 	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Cord" vord "chartered," "professional association," or the abbreviation "	Co". A professional/corporation name must contain the
 Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>) 	
2. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>) /	-3 PH 5:45
 If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address. 	
<u>Name of New Registered Agent</u>	
<u>New Registered Office Address:</u>	, Florida (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar s	
/ /	

Signature of New Registered Agent, if changing

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 diffice 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:

<u>X</u> Change	<u>PT John Doe</u>	
X Remove	<u>V</u> <u>Mike Jones</u>	
<u>X</u> Add	<u>SV</u> <u>Sally Smith</u>	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	VS LANDY MUNOZ	15327 NW 60 AVE, SUITE 220
Add		
Remove		MIAMILAKES, FL 33014
2) Change	CT MicHAEL SALEM	15327 NW60 AVE.,
Add		SUTTE 220 MIAMI LAKES, FL 33014
Remove 3.) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		<u></u>
Remove		
6) Change		
Add		
Remove		

Attach additional sheets, if necessary). (Be specific)	
	÷.

E. If amending or adding additional Articles, enter change(s) here:

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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)

	, if other than the
date this document was signed.	
Effective date if applicable:	<u> </u>
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will n document's effective date on the Department of State's records.	ot be listed as the
Adoption of Amendment(s) (<u>CHECK QNE</u>)	
□ 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.	
Dated5/36/17	
Signature	
selected, by an incorporator - if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
Aublen Rodriguez	
(Typed or printed name of person signing)	
Plasidant	
(Title of person signing)	
Page 4 of 4	
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