D11000108888

(Requestor's Name)		
	(Address)		
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PICK-UP	WAIT MAIL		
	(Business Entity Name)		
(Document Number)			
Certified Copies	Certificates of Status		
Special Instructions	to Filing Officer:		

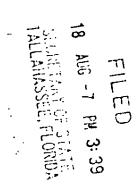
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AUG 0 9 2018 S. YOUNG



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: PHYSICAL 4 U, I	NC.			
DOCUMENT NUM	BER: P11000108888				
	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	MARLEN RODRIGUEZ				
	· · ·	Name of Contact Perso	n		
	PHYSICAL 4 U INC				
		Firm/ Company			
	5729 NW 151 STREET	Time Company			
		Address			
	MIAMI LAKES, FL 33014				
		City/ State and Zip Cod	le		
PHY	SICAL4UINSURANCE@GI	MAIL.COM			
	-	sed for future annual report	notification)		
	,	1	,		
For further informatic	on concerning this matter, pleas	se call:			
MARLEN RODRIG	UF7	. 786	366-1036		
		at (366-1036		
Name	of Contact Person	Area Co	ode & Daytime Telephone Number		
Enclosed is a check for	or 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)		
	Mailing Address Street Address				
Amendment Section Division of Corporations		Amendment Section Division of Corporations			
P.O. Box 6327 Clifton Building					
Tal	lahassee, FL 32314		2661 Executive Center Circle		
		Tallah	assee, FL 32301		

Articles of Amendment to Articles of Incorporation of

PHYSICAL 4 U, INC.	
(Name of Corporation as currently	filed with the Florida Dept, of State)
P11000108888	
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fi</i> its Articles of Incorporation:	dorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	Thenew
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	" "company," or "incorporated" or the abbreviation O". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	TILL TO THE
D. If amending the registered agent and/or registered office addressinew registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent	
(Florida stree	t address)
·	
<u>New Registered Office Address</u> :(C	, Florida
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	
Signature of New Reg	gistered 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 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	PT	John De	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	VP		LANDY MUNOZ	5729 NW 151 STREET
Add				MIAMI LAKES, FL 33014
X Remove				
2) Change		_		
Add				
Remove				
3) Change		_		·
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)		
		· - · ·	
		·	<u></u>
	_ _		-
If an amendment provides for an exch	usalussifiantia – a	annabation of ions of abo	W 0.0
provisions for implementing the ame	ndment if not contained	in the amendment itself:	105,
(if not applicable, indicate N/A)			
 .	<u> </u>		
		_	
	,,		
<u> </u>			

The date of each amendment(s) adopti- date this document was signed.	on:	, if other than the
-		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Departm	does not meet the applicable statutory filing requirements, this danent of State's records.	te will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the amendment(sent for approval.	5)
	d by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast for th	ne amendment(s) was/were sufficient for approval	
by	."	
·	(voting group)	
☐ The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and shareholde	:r
The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholder	
AUGUST 1, 20 Dated	018	
	, ·	
Signature	y, 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 cour duciary by that fiduciary)	
	RLEN RODRIGUEZ	
_,	(Typed or printed name of person signing)	
PRE	ESIDENT	
	(Title of person signing)	