

PI 2000042356

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JOHN J. LEMMON  
12/29/15

## **COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Day 1 Corporation, Document # P12000042356**  
Name of Corporation

The enclosed Articles of Incorporation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Mark A. Seyforth**  
Name of Person

**1543 NW 165<sup>th</sup> Street**  
**Unit 1543**  
**Miami Gardens, FL 33169**  
Address

**Kamilar@bellsouth.net**  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Mark A. Seyforth**  
At ( 937 ) 830-0051  
Name of Person 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 & ☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee  
Certificate of Status    Certified Copy    Certificate of Status  
(Additional copy is    Certified Copy enclosed)    (Additional Co is enclosed)

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT TO ARTICLES  
OF INCORPORATION OF**

**Day 1 Corporation**

(Name of the Corporation as it now appears on our records.)

(A Florida Corporation)

The Articles of Incorporation for this Corporation were filed on 4/24/12 and assigned

Florida document number **P12000042356**

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the Corporation here:**

N/A

Enter new principal offices address, if applicable:

(Principal office address *MUST BE A STREET ADDRESS*)

N/A

Enter new mailing address, if applicable:

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

N/A

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

N/A

Name of New Registered Agent:

New Registered Office Address:

**C. If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: N/A**

**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

Article one (1) of the Articles of Incorporation is amended to read as follows:

**“THE NAME OF THE CORPORATION IS: “DAY 1 CORPORATION.” THIS CORPORATION SHALL NOT BE CALLED “GOOD LIFE USA, LLC.” ANY PRIOR, CURRENT OR FUTURE REFERENCE TO THIS ENTITY AS “GOOD LIFE USA, LLC” IS REVOKED, WITHDRAWN AND FORBIDDEN.”**

**E. Effective date, if other than the date of filing: (optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)  
Pursuant to 605.0207 (3)(b)

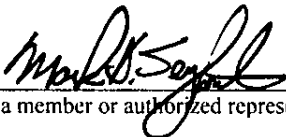
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TALLAHASSEE, FLORIDA

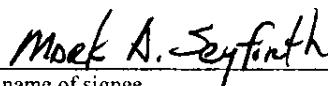
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated        DECEMBER 17, 2015

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

  
\_\_\_\_\_  
Typed or printed name of signee

**Filing Fee: \$35.00**