P12000057963

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone #)
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(Document Number)		
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA DOCUMENT NUMBE	TION: NATUR	PALLY BROW	IARD, INC.
	Amendment and fee are su		
Please return all correspo	ondence concerning this ma	tter to the following:	
	DEANN	A ALUST	
	NATURAL	Name of Contact Person WE 13 TH A Address	, INC
	2480	NE 1374A	Æ
	1.111 = 70	Address	S. 23305
-	WILIU	City/ State and Zip Cod	2 33305
	E-mail address: (to be us	y BROWARD red for future annual report	OGMAIL · COM notification)
For further information of	concerning this matter, pleas	se call:	
DEANNA	ALLEN	at (954	394-432-
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he 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)
	ng Address dment Section		Address Iment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 22, 2012

DEANNA ALLEN 2480 NE 13TH AVE. WILTON MANORS, FL 33305

SUBJECT: NATURALLY BROWARD, INC.

Ref. Number: P12000057963

We have received your document for NATURALLY BROWARD, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

If the corporation is a **PROFIT** corporation it must be signed 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.

If the corporation is a <u>NOT FOR PROFIT</u> corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carol Mustain Regulatory Specialist II

,

Letter Number: 812A00025912

3430 ME 13th Are



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 6, 2012

DEANNA ALLEN 4816 SW 28TH TERRACE DANIA BEACH, FL 33312

SUBJECT: NATURALLY BROWARD, INC.

Ref. Number: P12000057963

We have received your document for NATURALLY BROWARD, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

If the corporation is a **PROFIT** corporation it must be signed 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.

If the corporation is a <u>NOT FOR PROFIT</u> corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carol Mustain Regulatory Specialist II

Letter Number: 812A00025912

Articles of Amendment

to

Articles of Incorporation

of

NATURALLY BROWARD, LNC.	
NATURANCY BROWARD LNC. (Name of Corporation ascurrently filed with the Florida Dept. of State)	
P12000057963	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the foits Articles of Incorporation:	llowing amendment(s) to
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 "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name word "chartered," "professional association," or the abbreviation "P.A."	the abbreviation
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)	TE MOV 16 PM
Ş.	PM 12: 32
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 DEANNA ALLEN	
4816 SW 28 TH TERRACE (Florida street address)	
(Florida street address)	
New Registered Office Address: Davin BEACH, Florida 332 (City) (Zip Co	de)
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 possible statement of New Registered Agent, if changing	ition.

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.

X Change	PT John	Doc	
X Remove	<u>V</u> <u>Mike</u>	Jones	
X Add	SV Sally	Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	P	JEREMY CRAW	3565 SW 50TH ST
Add		,	FT LAUDERDALE FL 33312
Remove			
2) Change	<u>_</u> S	JASON TORMO	930 ROCKHILLAVE
Add			DAVIE, FL 33325
Remove			<u></u>
3) <a>Change	PS	DEANNA ALLEN	14165W27 TO COURT
Add			FT LANDERDAGE FZ 3335
Remove			
	IPT		1100 00
4) Change	VI	JUDITH DZER	1180 EAST TROPICAL WAY PLANTATION FZ 33317
Add			PLANTATION, A 30317
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
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······································	<u> </u>
- //	
an amendment provides for an exch rovisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	Yp.
(if not applicable, indicate N/A)	***

The date of each amendment(s) ado	ption: Series 1901
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):
	or the amendment(s) was/were sufficient for approval
by	(voting group)
	ted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adop action was not required.	ted by the incorporators without shareholder action and shareholder
Dated	1/13/12
	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court
	d fiduciary by that fiduciary)
_	(Typed or printed name of person signing)
	(1 yped or printed name of person signing)
_	VICE PRESIDENT
	(Title of person signing)