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SECRETARY OF STATE OF THE SECRETARY OF SECRE

2-19-15

## **COVER LETTER**

TO: Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORAT	TION: <u>Center</u> For	r Acapancture c	and Natural Medicine Inc.
DOCUMENT NUMBER			
The enclosed Articles of A	Amendment and fee are su	bmitted for filing.	
Please return all correspon	ndence concerning this ma	tter to the following:	
	ma	ruuress	ste lois, Maitland, FL, 3275
	E-mail address: (to be us	sed for future annual report	notification)
For further information co	ncerning this matter, pleas	se call:	
<del></del>	ontact Person	at ( 8/8	be & Daytime Telephone Number
Enclosed is a check for the	e following amount made	payable to the Florida Depa	urtment 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)
Amendr	Address nent Section n of Corporations	Amend	Address Iment Section on of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



15 FEB 17 AM 10: 23 (Name of Corporation as currently filed with the Florida Dept. of State) (P12000101244) 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: 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 (Florida street address) New Registered Office Address: Florida (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

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 <math>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 Doe	
X Remove	V Mike Jones	
_X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	D Gene Wei	1650 N. Mills Ave
Add		OP+472, Orlando, F
Remove		32803'
2) Change	D Ursula Escher	814 Westwind Ln
Add		214 Westwind Ln Casselberry FL
Remove		32730
3) Change		<u> </u>
Add		
Remove		
4) Change		
Add		
Remove		<del></del>
5) Change		
Add		
Remove		
2 D a		
6) Change		
Add		
Remove		

f 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)	
f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	
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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)	
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provisions for implementing the amendment if not contained in the amendment itself:	
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
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The date of each amendment(s) adoption:	SECRETARY OF STATE DIVISION OF CORPORATIONS	, if other than th
date this document was signed.		
Effective date if applicable: (no more than	15 FEB 17 AM 10: 23 in 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)		
The amendment(s) was/were adopted by the shareholders. The shareholders was/were sufficient for approval.	The number of votes cast for the amendment(s)	
The amendment(s) was/were approved by the shareholders the must be separately provided for each voting group entitled.		
"The number of votes cast for the amendment(s) was/v	••	
by(voting group)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
(voting group)		
The amendment(s) was/were adopted by the board of director action was not required.	ors without shareholder action and shareholder	
The amendment(s) was/were adopted by the incorporators was action was not required.	rithout shareholder action and shareholder	
Dated 2-11-15		
Signature		
(By a director, president or other of	fficer - if directors or officers have not been	
selected, by an incorporator — if in appointed fiduciary by that fiduciar	the hands of a receiver, trustee, or other court ry)	
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	r printed name of person signing)	<del></del>
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	Title of person signing)	