# P1300019007

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PICK-UP WAIT MAIL
(Business Entity Name)
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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORAT	TION:	Alibrated A	Jurnition Inc	
DOCUMENT NUMBER:		P 130000 19067		
The enclosed Articles of A	mendment and fee are s	ubmitted for filing.		
Please return all correspon	dence concerning this ma	atter to the following:		
		ROSSENE K	Inigisman  Thuition Duc  The Haven DR	
<u></u>	······································	Name of Contact Perso	on	
		alimated No	Huition Duc	
		Firm/ Company	,	
	1	8225 Cypies	s Haven DR	
•		Jampa, 76	33647	
City/ State and Zip Code				
	E-mail address (to be	and for figure annual reman	t natification)	
	E-man address: (to be t	sed for future annual repor	t notification)	
For further information co.	ncerning this matter inles	se call·		
1 of further information co.	_			
	ROSSEN E	Rugisman 813	997- 4641	
Name of C	ontact Person	Area Co	ode & Daytime Telephone Number	
Enclosed is a check for the	e following amount made	payable to the Florida Dep	partment of State:	
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status	
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		
•		Tallah	nassee, FL 32301	



July 22, 2013

ROSSEN E. KRIGSMAN CALIBRATED NUTRITION INC. 18225 CYPRESS HAVEN DR. TAMPA, FL 33647

SUBJECT: CALIBRATED NUTRITION INC.

Ref. Number: P13000019067

We have received your document for CALIBRATED NUTRITION 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 document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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.

Letter Number: 313A00017725

Irene Albritton Regulatory Specialist II

www.sunbiz.org



July 12, 2013

ROSSEN E. KRIGSMAN CALIBRATED NUTRITION INC. 18225 CYPRESS HAVEN DR TAMPA, FL 33647

SUBJECT: CALIBRATED NUTRITION INC.

Ref. Number: P13000019067

We have received your document for CALIBRATED NUTRITION 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 current name of the entity is as referenced above. Please correct your document accordingly.

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

Please provide us with an email address for this business entity. The Division of Corporations sends important reminders and notices to those business entities that have provided our office with an email address. Make sure your entity receives these helpful communications by providing our office with an active email address.

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.

Irene Albritton Regulatory Specialist II

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Letter Number: 213A00017053

#### **Articles of Amendment**

#### Articles of Incorporation

## (Name of Corporation as currently filed with the Florida Dept. of State)

### P 13 0000 19067 (Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to

	PHARMA			<del> </del>	
me must be distinguishable and co lorp.," "Inc.," or Co.," or the desig ord "chartered," "professional associ	nation "Corp," "I	Inc," or "Co". A			
Enter new principal office address	, if applicable:				
incipal office address <u>MUST BE A</u> .	<u>STREET ADDRES</u>	<u>sz</u> )			
				<del></del>	
		·		<del>.</del>	
Enter new mailing address, if app					
Mailing address <u>MAY BE A POST</u>	<u>OFFICE BOX</u> )	<u></u>	<del></del>		
(Mailing address <u>MAY BE A POST</u>	<u>"OFFICE BOX</u> )				
(Mailing address <u>MAY BE A POST</u>	<u> OFFICE BOX</u> )				
	and/or registered o		lorida, ent	er the name o	
If amending the registered agent a new registered agent and/or the ne	and/or registered office		lorida, ent	er the name o	
If amending the registered agent a	and/or registered office		lorida, ent	er the name o	
If amending the registered agent a new registered agent and/or the ne	and/or registered office	e address:		er the name o	
If amending the registered agent a new registered agent and/or the new registered agent agen	and/or registered office			er the name o	
If amending the registered agent a new registered agent and/or the new registered agent	and/or registered office	e address:		er the name o	

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 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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change			
Add			· <del>- · · · · · · · · · · · · · · · · · ·</del>
Remove			
2) Change			
Add	-		
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add.			
Remove			
O. Ch.			
6) Change			
Add			
Remove			

Atta	ding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)	
	<del></del>	
		_
f ai	nendment provides for an exchange, reclassification, or cancellation of issued shares, ons for implementing the amendment if not contained in the amendment itself: not applicable, indicate N/A)	

The date of each amendment(s) ad date this document was signed.	option:	, if other than the
Effective date if applicable:	July 23, 2013	
	(no more than 90 days after amendment file date)	- <del></del> -
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adoption was not required.	oted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopaction was not required.	pted by the incorporators without shareholder action and shareholder	
Dated	July 23, 2013	
Signature		
Byad	rector, president or other officer - if directors or officers have not been	<del></del>
	by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
аррони		
	KOSSEN & KRIGSMAN	
-	(Typed or printed name of person signing)	<del></del>
	President	
•	(Title of person signing)	<del></del>