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SECRETARY OF STATE

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R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: 7 CHAKRA	AS INCORPORATED			
DOCUMENT NUMBER: P1300006261	1			
The enclosed Articles of Amendment and fee are su	abmitted for filing.			
Please return all correspondence concerning this mat	tter to the following:			
Joseph Villate				
-	Name of Contact Person			
Joseph Villate CF				
Firm/ Company				
250 Catalonia Ave, STE 506				
Address				
Coral Gables, FL	33134			
	City/ State and Zip Code			
VillateCPA@bellsout	th not			
	sed for future annual report notification)			
is-man address, for the da	sed for facility annual report northeadanty			
For further information concerning this matter, pleas	se call:			
Joseph Villak	305 541 - 4714			
Name of Contact Person	at (305) 541 - 4714 Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made p				
\$35 Filing Fee \$2 Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Street Address Amendment Section				

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

FILED

Articles of Amendment to Articles of Incorporation of

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SECRETARY OF STATE.

7 CHAKRAS INCORPORATED

(Name of Corporation as	currently filed with the Flo	rida Dept. of State)	· · · · · · · · · · · · · · · · · · ·	-
P13000062611				
(Documer	nt Number of Corporation (if k	nown)		-
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this <i>FI</i>	orida Profit Corporation v	idopts the following	g amendment(s) to
A. If amending name, enter the new na	nne of the corporation:			
				_The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	vation "Corp," "Inc," or "Co	". A professional corpor	orated" or the al- ation name must c	bbreviation contain the
B. <u>Enter new principal office address,</u> (Principal office address <u>MUST BE A S</u>				
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)				
D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent	d/or registered office addres v registered office address: Nabila Yousef	s in Florida, enter the na	nie of the	
Hime of their Register angen	250 CATALONIA	AVE. STE 506	_	
	(Florida street	address)	-	
New Registered Office Address:	Coral Gables (City)	, Florida	33134 (Zip Code)	
New Registered Agent's Signature, if cl	nanging Registered Agent: ered agent. I am familiar with	abili uja	,	

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 Dog	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PST	SULEIMAN YOUSEF	250 Catalonia Ave, #506
Add			Coral Gables, FL 33134
Remove			
2) Change	PST	Nabila Yousef	250 Catalonia Ave, #506
Add			Coral Gables, FL 33134
Remove			
3) Change			
Remove			
4) Change	<u> </u>		
Add			
Remove			
5) Change	_		
Add			
Remove			
6) Change			
Add			
Remove			

<mark>amending or adding additional Arti</mark> ttach <i>additional sheets, if necessary).</i>	(Be specific)
	, 100 mm m m m m m m m m m m m m m m m m
	•
an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
orovisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(i) not appacable, malcale N/A)	•

The date of each amendment date this document was signed	• • • • • • • • • • • • • • • • • • • •	, if other than the
Effective date if applicable:	10/3/2013	
isteetive date <u>is appressive</u> .	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ad for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	.,	
	(voting group)	
The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder	
Dated_10/0	3/2013	
Signature	nasivyout.	
	y a director, president or other officer - if directors or officers have not been	
	lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	Nabila Yousef	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	