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(Fi	Requestor's Name)			
(Address)				
A)	ddress)	 		
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(E	Business Entity Name	e)		
(Document Number)				
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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Blood Orange Medicy (NC. **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Sarah Bighap

Contact Person bishop. Sarahmane @ amail com

E-mall address: (to be used for future annual report notification) For further information concerning this matter, please call: at (850) 591-2015

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 Copy is enclosed)

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
Tallahassee, FL 32301

Articles of Amendment

to Articles of Inc	· · · · · · · · · · · · · · · · · · ·
of	14. The
Blood Orange M	edic, INC.
(Name of Corporation as currently filed with the I	Α,
P1300009476	
(Document Number of Corporation (i	if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or " word "chartered," "professional association," or the abbreviation '	'Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	303 6th Street
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Alastic Breach, Florida
	32233
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	303 6th Street
	Atlantic Breach, Florida
•	32233
D. If amending the registered agent and/or registered office addinew registered agent and/or the new registered office address	ress in Florida, enter the name of the
Name of New Registered Agent Sarah Bi	ehop
303 4th St	riet
(Planta and	eet address)
New Registered Office Address: Atlantic B	earl, Florida 32233 (Zip Code)
(City)	(Zip Code)
lew Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent. I am familiar v	with and accept the obligations of the position.
Jean of A	THE STATE OF THE S
Signature of New Registered	rgent, if Edunging

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	n Doe	
X Remove	<u>V</u> <u>Mik</u>	<u>ce Jones</u>	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	DIR	Corey Brooks	428 13th Ave North
Add Add		ı	Jax Breach, FL
Remove			32250
2) Change	DIR	Niatt Woods	303 wth Street
Add			Atlantic Beach, FL
Remove			32233
3) Change	DIR	Sarah Rislop	SQ3 6th Street
Add		. 0	Atlantic Breach, Pl
Remove			32233
4) Change		N/A	
Add			<u></u>
Remove			
5) Change		W/A	
Add			
Remove			
6) Change		N/A	
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
Article II:	<u></u>
The principal place of business address:	
303 6th Street, Atlantic Black, Florida 32233	
The mailing address of the corporation is:	
303 6th Street, Hlantic Beach, Florida 32233	
Article II:	
The number of Shares the corporation is authorized to iss	ue p
Aticle I:	
The name and Klorida Street adhees of the registered ag	ent ip
SARAH BISHOP	
363 6th STREET, ATLANTIC BRACH, FLORIDA 30	<u> 123</u> 3
1 CERTIFY THAT I AM FAMILIAR WITH AWD ACCEPT THE	
CESPONSIBILITIES OF THE REGISTERS AGENT	
Saw Al Birty	
F. 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)	
N/A	
	·—

The date of each amendment(s) adoption: 3/9/2014 date this document was signed.	, if other than the
Effective date if applicable: (no more than 90 days after amendment file date)	-
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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/were adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Signature (By a director president or other officer - Af directors or officers have not been selected, by an incorporator f if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	-
Sarah M Bishop (Typed or printed name of person signing) Director (Title of person signing)	-