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SECRETARY OF STATO

C. LEWIS

APR 21 2014

EXAMINER

APPROVED

COVER LETTER

Division of Corporations					
NAME OF CORPORATION: Natural Blends					
DOCUMENT NUMBER: P14000006158					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Tiffany OKolichany Name of Contact Person Watural Blends					
1830 NE 48th St					
Pompano Beach Fl 33064 City' State and Zip Code					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Tiffany Okolichany at (561) 202-4387 Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee \$\begin{array}{cccccccccccccccccccccccccccccccccccc					

Mailing Address

TO: Amendment Section

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

APPROVED AND FILED

Articles of Amendment

to
Articles of Incorporation

14 APR 14 PM 2: 14

SECRETARY OF STATE TAELAHASSEE, FLORIDA (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 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 Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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

(City)

Florida

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	<u>Doe</u>	
X Remove	V Mike	<u>Jones</u>	
X Add	<u>SV</u> <u>Sally</u>	<u>Smith</u>	
Type of Action (Check One)	Title	Name	Address
1) Change	<u>ex.</u>	Vice Pres.	Tiffany Okolidan, 6911 Blue Skies Dr.
Add Remove		Vice Pres./ Sec.	6911 Blue Skies Dr. Lake Worth Fl 33463
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
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APPROVEE AND FILED

The date of each amendment(s) adoption: date this document was signed.	May. 2		14 APR 14 PM. A other than the
-	ar. 27 (no more than 90 da	ZO14	SECRETARY OF STAFE TALLAHASSEE, FLORIDA late)
	•	, ,	,
Adoption of Amendment(s)	CHECK ONE)		
The amendment(s) was/were adopted by the shareholders was/were sufficient for	he shareholders. The nun or approval.	nber of votes cast for the	amendment(s)
The amendment(s) was/were approved by must be separately provided for each vot			
"The number of votes cast for the ar	nendment(s) was/were suf	ficient for approval	
by			
	voting group)		
The amendment(s) was/were adopted by t action was not required.	he board of directors with	out shareholder action a	nd shareholder
The amendment(s) was/were adopted by t action was not required.	he incorporators without s	shareholder action and sh	nareholder
Dated ARTH	02 20	14	`
Signature	resident of other officer -)
selected by any	ncorporator – it in the han ary by that fiduciary)	ds of a receiver, trustee,	or other court
	iffany (Typed or printe	Okolicho d name of person signin	iny
Uiz	o Pros S	Sec	5/
<u> </u>	(Title of	person signing)	