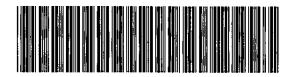
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APPROVED AND FILED

C. LEWIS

APR 2 4 2014

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: THE HEA	
DOCUMENT NUMBER: P140000312	221
The enclosed Articles of Amendment and fee are	e submitted for filing.
Please return all correspondence concerning this	matter to the following:
ELISABETH CA	ARR
	Name of Contact Person
 	Firm/ Company
822 VISTABUL	A ST
	Address
LAKELAND, FL	
	City/ State and Zip Code
ELISABETH@THE	HEALTHGIRL.COM
E-mail address: (to be	e used for future annual report notification)
For further information concerning this matter, pl	lease call:
ELISABETH CARR	at (512) 608-8820
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount ma	de payable to the Florida Department of State:
\$35 Filing Fee 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 Tallahassee, FL 32301





Articles of Amendment to Articles of Incorporation

14 APR 17 AM 10: 48

SECRETARY OF STATE TALLAHASSEE, PLORIDA

THE HEALING SOUP, INC	FALLAMASSEE, PLUMUA
(Name of Corporation as currently filed with the Flo	ida Dept. of State)
P14000031221	
(Document Number of Corporation (if k	nown)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
VIEWCORE, INC	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	"company," or "incorporated" or the abbreviation ". A professional corporation name must contain the
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 new registered agent and/or the new registered office address:	s 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: (City)	, Florida
(City)	(2tp Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wit	h 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	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
Change Add				
Remove				
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				**************************************
5) Change				
Add				
Remove				
6) Change	,	-		
Add -	•			
Remove				

*	(Be specific)
	
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an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
an amendment provides for an exch rovisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an analysis
rovisions for implementing the ame	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
rovisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an analysis
rovisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
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rovisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and amendment itself:
rovisions for implementing the ame	nange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:

From:

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PAGE 05/05

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SECRETARY OF STATE The date of each amendment(s) adoption: 04/11/2014 , if other than the date this document was signed. 04/11/2014 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 east for the amendment(s) was/were sufficient for approval (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. Dated_04/11/2014 Signature (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) ELISABETH CARR (Typed or printed name of person signing) PRESIDENT (Title of person signing)