PURULAR

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





900264893119

900264893119 10/06/14--01042--023 **35.00

And

OCT 9 2014

R. WHITE

TE OCT -6 PH Z: II

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: CAHILL'S INCOME SOLUTIONS, INC (Name of Corporation)
DOCUMENT NUMBER: P14000042328
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Judy Cahill
(Name of Person)
Cahill's Income Solutions
(Name of Firm/Company)
6040 W Last Chance Lane
(Address)
Spring Hill, Fl. 34433
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at () (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 63272661 Executive Center CircleTallahassee, FL 32314Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED 14 OCT -6 PH 12: 16

CAHILL'S INCOME SOLUTIONS, INC

	· · ·	
	ed with the Florida Dept. of State)	TALEAHASSEE, CLORIO
P14000042328		nes and child to
(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida as Articles of Incorporation:	Statutes, this Florida Profit Corporation	adopts the following amendment
A. If amending name, enter the new name of the cor	poration:	
N/A		The new
name must be distinguishable and contain the word (Corp.," "Inc.," or Co.," or the designation "Corp.," or the designation," or the designation," or the designation,	"Inc," or "Co". A professional corp	rporated" or the abbreviation oration name must contain the
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADD</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	2)	
		
		· · · · · · · · · · · · · · · · · · ·
 If amending the registered agent and/or registered new registered agent and/or the new registered or 		name of the
D. If amending the registered agent and/or registered new registered agent and/or the new registered of New Registered Agent		name of the
new registered agent and/or the new registered o		name of the
new registered agent and/or the new registered o	ffice address:	

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 Do	<u>oe</u>	
X Remove	¥	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		<u>Nате</u>	<u>Addres</u> s
1) Change	TR		Shayne Cahill	5493 Pinehurst Dr
Add				Spring Hill, FI 34606
Remove				
2) Change		_		
Add				
Remove				
3) Change	*****	-		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
Shayne Cahill is being removed from the office of Treasurer for lack of ability to
contribute to the company financially. As of July 26, 2014. A meeting of the officers
was held to discuss the change of direction for the company and Shayne does not
have the ability to contribute financially so he will forfeit his position as a shareholder
and officer of the company. The company will no longer operate as a Multi-Level
marketing associate and will now focus on the fitness industry.
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) Share distribution will be as follows:
Lennie Cahill 51%
Judy Cahill 49%

The date of each amendment(s) adoption: July 26, 2014	
date this document was signed.	
Effective date if applicable:	<u> </u>
(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.	
Dated July 27, 2014 Signature (By a director, president or other officer – if directors or officers have not been	
(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)	_
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
VICE PRESIDENT (Title of person signing)	
(Title of person signing)	