P14000056102

| (Requestor's Name) | | | | |
|---|--|--|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
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[RM 12-30-14

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: HEALTHY LIVING PHARMACY INC |
|--|
| DOCUMENT NUMBER: P14000056102 |
| NAME OF CORPORATION: HEALTHY LIVING PHARMACY INC DOCUMENT NUMBER: P14000056102 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: |
| Please return all correspondence concerning this matter to the following: |
| TERESITA DE LA CARIDAD LEZCANO |
| Name of Contact Person HEALTHY LIVING PHARMACY INC |
| Firm/ Company |
| 4401 W FLAGLER ST |
| Address CORAL GABLES, FL 33134 |
| City/ State and Zip Code |
| |
| businessacctprof@gmail.com E-mail address: (to be used for future annual report notification) |
| E-mail address. (to be used for future aimad report notification) |
| For further information concerning this matter, please call: |
| TERESITA DE LA CARIDAD LEZCANO |
| 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 Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed) |
| Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301 |

Articles of Amendment to Articles of Incorporation of

HEALTHY LIVING PHARMACY INC

P14000056102

| Articles of A | mendment |
|--|---|
| to Articles of Inc | corporation |
| of | · - |
| HEALTHY LIVING PHARMACY INC | 3 9 To 1 |
| (Name of Corporation as currently filed with the F | lorida Dept. of State) |
| P14000056102 | |
| (Document Number of Corporation (| Iorida Dept. of State) f 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: | ř |
| | 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: (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 add new registered agent and/or the new registered office address Name of New Registered Agent | |
| (Florida st | vet address) |
| | |
| New Registered Office Address: (City) | , Florida (Zip Code) |
| New Registered Agent's Signature, if changing Registered Agent | <u>:</u> |
| 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 |

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> <u>Jo</u> | <u>hn Doe</u> | |
|----------------------------|---------------------|------------------|---------------------|
| X Remove | <u>v</u> <u>M</u> | ike Jones | |
| <u>X</u> | <u>SV</u> <u>Sa</u> | Illy Smith | |
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s |
| 1) Change | P | ISABEL CAMARA | 6544 SW 57 AVE APT3 |
| Add | | | MIAMI, FL 33143 |
| Remove | | | |
| 2) Change | Р | TERESITA LEZCANO | 6544 SW 57 AVE APT3 |
| Add | | | MIAMI, FL 33143 |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| | Articles, enter change(s) here: ury). (Be specific) | |
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| If an amendment provides for an oppositions for implementing the | exchange, reclassification, or cancellation of issued shares, amendment if not contained in the amendment itself: | |
| If an amendment provides for an oppositions for implementing the a | amendment if not contained in the amendment itself: | |
| provisions for implementing the | amendment if not contained in the amendment itself: | |
| provisions for implementing the | amendment if not contained in the amendment itself: | |
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| provisions for implementing the | amendment if not contained in the amendment itself: | |

| The date of each amendment(s) date this document was signed. | adoption: DEGLINDER 12, 2014 | , if other than the |
|--|--|---------------------|
| _ | ECEMBER 12, 2014 | |
| <u></u> | (no more than 90 days after amendment file date) | |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| The amendment(s) was/were as by the shareholders was/were | dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval. | |
| | pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s): | |
| "The number of votes cas | st for the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | (voting group) | |
| The amendment(s) was/were a action was not required. | dopted by the board of directors without shareholder action and shareholder | |
| The amendment(s) was/were a action was not required. | dopted by the incorporators without shareholder action and shareholder | |
| Dated_DECE | MBER 12, 2014 | |
| Signature | Bhanf | |
| | director, president or other officer - if directors or officers have not been | |
| | ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary) | |
| | TERESITA DE LA CARIDAD LEZCANO | |
| | (Typed or printed name of person signing) | |
| | PRESIDENT | |
| | (Title of person signing) | |