## N14000081228

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FACE SHASSEE, FLORIG

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: NATURA	L'S ENERGY	INC		
DOCUMENT NUMI	P140000812	288			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	YALIXIS D	UARTE			
		Name of Contact Person	1		
	5391 W 8 A	Firm/ Company			
	HIALEAH, F	Address			
	<u> </u>	City/ State and Zip Code	8		
	E-mail address: (to be us	ed for future annual report	notification)		
For further informatio	n concerning this matter, pleas	e call:			
YALIXIS	DUARTE	<sub>at (</sub> 786	262-4584		
Name	of Contact Person		de & Daytime Telephone Number		
Enclosed is a check for	Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Am Div P.O	lling Address endment Section ision of Corporations . Box 6327 lahassee, FL 32314	Amend Division Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301		

## Articles of Amendment to Articles of Incorporation of

FILED

NATURAL'S ENERGY INC	2014 NOV 17 PM 1: 23
(Name of Corporation as currently filed with the I	Florida Dept. of State)
P14000081288	Florida Dept. of State)  SCON TARY OF STATE  SCON TARY OF STATE  TARE ARASSEE, FLORIDA
(Document Number of Corporation (	(if known)
ursuant to the provisions of section 607.1006, Florida Statutes, this s Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(
NATURE'S ENERGY INC	The new
name must be distinguishable and contain the word "corporation "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
3. Enter new principal office address, if applicable:	83 W 23 ST
Principal office address <u>MUST BE A STREET ADDRESS</u> )	HIALEAH,FL 33010
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3690 W 18 AVE
	PO # 126365, HIALEAH
	FL 33012
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres	
Name of New Registered Agent	· · · · · · · · · · · · · · · · · · ·
(Florida s	treet address)
New Registered Office Address:	, Florida
(City	y) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	nt: with and accept the obligations of the position.
Signature of New Registered	l 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>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sm	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		
Add Remove				
2) Change		<del></del>		
Add Remove				
3) Change		<del></del>		
Add Remove				
4) Change		_		
Add Remove				
5) Change		<del>.</del>		
Add Remove				
6) Change				
Add				
Remove				

(Attach additional sheets, if necessary)	rticles, enter change(s) here:
	. (be specific)
N/A	
$J^{*}$	
	•
	•
If an amendment provides for an ex	schange, reclassification, or cancellation of issued shares,
T. If an amendment provides for an exprovisions for implementing the ar (if not applicable, indicate N/A)	mendment if not contained in the amendment itself:
provisions for implementing the ar	mendment if not contained in the amendment itself:
provisions for implementing the ar	mendment if not contained in the amendment itself:
provisions for implementing the ar (if not applicable, indicate N/A)	mendment if not contained in the amendment itself:
provisions for implementing the ar (if not applicable, indicate N/A)	mendment if not contained in the amendment itself:
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provisions for implementing the ar (if not applicable, indicate N/A)	mendment if not contained in the amendment itself:

The date of each amendment(s) adoption: 11/06/2014	, if other than th
date this document was signed.	
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)	
(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 11/06/2014 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)	<del>_</del>
YALIXIS DUARTE	
(Typed or printed name of person signing)	<del></del>
PRESIDENT	
(Title of person signing)	