P1500013363

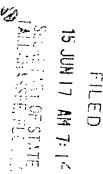
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: FITLIFE DESIGN	Z INC.	
DOCUMENT NUMB	BER: P15000013363		
	of Amendment and fee are sul	bmitted for filing.	
Please return all corres	pondence concerning this mat	iter to the following:	
	NICHOLAS STELLA		
,		Name of Contact Persor	1
	FITLIFE DESIGNZ INC.		
		Firm/ Company	
	639 E OCEAN AVE #205		
		Address	
	BOYTON BEACH, FL 3343	5	
		City/ State and Zip Code	e
goloof	Ditifofoshian ann		
sales	@fitlifefashion.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Scott Hinz		at (<u>925</u>	250-4802
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment 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)
Ame Divi	ling Address endment Section sion of Corporations Box 6327	Ameno Divisio	Address Iment Section on of Corporations Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

FITLIFE DESIGNZ INC. (Name of Corporation as currently filed with the Florida Dept. of State) P15000013363 (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: N/A The new 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." N/A B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) C. Enter new mailing address, if applicable: N/A (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 Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: 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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	COO	SCOTT HINZ	1900 PACIFIC COAST HWY
X Add			#6
Remove			HUNTINGTON BCH, CA 92648
2) Change	СТО	JOHNATHAN RUGGIERO	13900 TAHITI WAY
X Add			#318
Remove			MARINA DEL REY, CA 90292
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) he (Attach additional sheets, if necessary). (Be specific)	<u></u>
N/A	
	
F. If an amendment provides for an exchange, reclassification, of provisions for implementing the amendment if not contained (if not applicable, indicate N/A) We request the following changes to re-proportion the 100 company	l in the amendment itself:
RYAN NEEDLE - 25 shares	
NICHOLAS STELLA - 25 shares	
SCOTT HINZ - 25 shares	
TOURIST AND DESCRIPTION AS A	
JOHNATHAN RUGGIERO - 25 shares	

	April 1, 2015
	(s) adoption:, if other than the
date this document was signed	
Effective date <u>if applicable</u> :	April 1, 2015
Effective date in applicable.	(no more than 90 days after amendment file date)
	this block does not meet the applicable statutory filing requirements, this date will not be listed as the ne Department of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
■ The amendment(s) was/web by the shareholders was/web	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement and for each voting group entitled to vote separately on the amendment(s):
	cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
	31,2015
Signature _	Nic stella
(E So	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court oppointed fiduciary by that fiduciary)
	Nicholas Stella
	(Typed or printed name of person signing)
	President
	(Title of person signing)