P15000044942

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	TION: Spark Health, Inc.		
DOCUMENT NUMBER	R: P15000046942		
The enclosed Articles of A	Amendment and fee are su	bmitted for filing.	
Please return all correspoi	ndence concerning this ma	tter to the following:	
Dr.	Sidney Coupet		
_		Name of Contact Person	1
Spa	rk Health, Inc.		
		Firm/ Company	
27	51 N. PALM AIRE DR A	ΡΓ. #409	
		Address	
PO	MPANO, FL 33069		
		City/ State and Zip Code	e
sidneyco	ipet@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information co	ncerning this matter, pleas	se call:	
Dr. Sidney Coupet		at (<u>814</u>	449-3650
Name of C	ontact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for th	e 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)
Amendi Division P.O. Bo	x Address ment Section n of Corporations x 6327 ssee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Spark Health, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P15000046942 (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: 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." 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 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: , Florida (City) (Zip Code) 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.

Example: X Change	<u>PT</u>	John Doe		
X Remove	Y	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
I) Change	T	Sarah-Jane Q Coupet	3600 Mystic Point Dr	
Add			Apt 1717	
X Remove			Aventura, FL 33180 US	
2) Change	S	Lori Dorilas	3600 Mystic Point Dr	
Add			Apt 1717	
X Remove			Aventura, FL 33180 US	
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)
Article IV
This corporation is authorized to issue 10,000,000 shares of common voting stock. All or any part of the capital stock may be
paid for in cash, in property, or in labor or services actually performed for the corporation. All stock shall be fully paid
for when issued and shall be nonassessable. Each shareholder of the corporation shall have the right to purchase, subscribe
for, or receive a right or rights to purchase or subscribe for, at the subscription price offered to the general public,
a pro rata portion of any stock of any class that the corporation may issue or sell.
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) N/A

The date of each amendment(s) adoption: date this document was signed.	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not document's effective date on the Department of	of meet the applicable statutory filing requirements, this date will not be listed as the State's records.
Adoption of Amendment(s) (CH	ECK ONE)
The amendment(s) was/were adopted by the sby the shareholders was/were sufficient for a	shareholders. The number of votes cast for the amendment(s) pproval.
	shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes cast for the amen	dment(s) was/were sufficient for approval
by	<u> </u>
(vot	ing group)
☐ The amendment(s) was/were adopted by the laction was not required.	poard of directors without shareholder action and shareholder
action was not required.	ncorporators without shareholder action and shareholder
$\frac{5}{28}$	318
Dated $\frac{5}{28}/2$	Den ES:
(By a director, presi	dent of other officer – if directors or officers have not been rporator – if in the hands of a receiver, trustee, or other court by that fiduciary)
Dr. Sidney C	Coupet
(Typed or printed name of person signing)
President/CI	EO Spark Health, Inc.
	(Title of person signing)