P15000015935

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Amend

OCT 13 2015 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Live & Nurture Inc			
DOCUMENT NUMI				
	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this mat	ter to the following:		
	Aaron Lichtenstadter			
		Name of Contact Persor	1	
Clinton Hill Filing Services Inc.				
		Firm/ Company		
	5816 12 Avenue			
		Address		
	Brooklyn NY 11219			
		City/ State and Zip Code	9	
bagel	stix@yahoo.com			
		ed for future annual report	notification)	
For further information Aaron Lichtenstadter	n concerning this matter, pleas	e call:at (917	337-6687	
Name of Contact Person			de & Daytime Telephone Number	
	r the following amount made		•	
■ \$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 P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle eassee, FL 32301	

Articles of Amendment to Articles of Incorporation of

	Articles of Ir	-	Dept. OF Strate ARY OF ST
Live & Nurture Inc.	O	f	2015 OCT - ED
	of Corporation as curren	tly filed with the Florida	Dent of Clate) PH In
P15000075935	or corporation as curren	ily filed with the Florida	LAHASS OF
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	.1006, Florida Statutes, this	s Florida Profit Corporat	ion adopts the following amendment(s)
A. If amending name, enter the new n	ame of the corporation:		
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional co "P.A."	
B. Enter new principal office address,		3344 Griffin Road	
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)	Fort Lauderdale FL	33312
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		3344 Griffin Road Fort Lauderdale FL	33312
D. If amending the registered agent an new registered agent and/or the ne			e name of the
Name of New Registered Agent			
	3241 SW 44 Street, Apt.	В	
	(Florida s	treet address)	
New Registered Office Address:	Fort Lauderdale		, Florida 33312
· ·		(City)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regis			gations of the position.
	Signature of New	Registered Agent, if chan	ging

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	<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) X Change	PTS	Oron Unger	3241 SW 44 Street
Add			Apt. B
Remove			Fort Lauderdale FL 33312
2) Change			
Add			
Remove			
3) Change	·····	- 	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additio	nal sheets, if necessary).	(Be specific)			
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					<u> </u>
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	· · · · · · · · · · · · · · · · · · ·				
provisions fo	ent provides for an excha r implementing the amen	nge, reclassification	on, or cancellation ined in the amend	of issued shares, ment itself:	
(if not ap	plicable, indicate N/A)				
					
				· · · · · · · · · · · · · · · · · · ·	<u>.</u>
					

The date of each amendment(s) add date this document was signed.	option:	_, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will artment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suff	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adoption was not required.	oted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adoption was not required.	nted by the incorporators without shareholder action and shareholder	
October 08,	2015	
Dated		_
(By a di selected	rector, president or other officer – if directors or officers have not been, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	_
	Oron Unger	
•	(Typed or printed name of person signing)	
	President	
•	(Title of person signing)	