P15000100220

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SECRETARY OF STATE
TALLAHASSEE, PLORIDS

JAN 0 4 2016 C. CARROTHERS

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATIO	N:As	pen Kay Naturals, Inc.	· 	
DOCUMENT NUMBER:	P1:	5000100220		
The enclosed Articles of Ama	endment and fee are su	bmitted for filing.		
Please return all corresponde	nce concerning this mat	tter to the following:		
	Shei	ila A. Ernissee		
		Name of Contact Persor)	
Aspen Kay Naturals, Inc.				
Firm/ Company				
	1212 Rio	lge Avenue		
		Address	······································	
	Clearwa	ter, FL. 33755		
		City/ State and Zip Code	3	
	ahilaha	rnissee@yahoo.com		
		sed for future annual report	notification)	
L	-man address. (10 00 as	ou toi rataro amiasa roport	10111041011)	
For further information conce	erning this matter, pleas	se call:		
Sheila A. Ernissee		at (312-7876	
Name of Con	tact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the fo	ollowing amount made	payable to the Florida Depa	urtment 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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		 Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle 		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Aspen Kay Naturals, Inc.

Aspen Kay Ivaturais, inc.				
(Name of Corporation as currently filed with the Florid	a Dept. of State)			
P 15000100220				
(Document Number of Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corpora</i> its Articles of Incorporation:	ation adopts the fo	llowing am	endmen	t(s) to
A. If amending name, enter the new name of the corporation:				
		The	new	
name must be distinguishable and contain the word "corporation," "company," or "i "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional cword "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:		72.03 F (0) 87.03	2015 DE	week-de-player
(Mailing address MAY BE A POST OFFICE BOX)		ETARY HASSE	EC 28	
		OF STAT	<u>5</u> :	
D. If amending the registered agent and/or registered office address in Florida, enter the new registered agent and/or the new registered office address:	he name of the	₫mi	ယ္အ	
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 obli	igations of the pos	itio n .		
Signature of New Registered Agent if cha				

. 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 Do	<u>oe</u>	
X Remove	¥	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change		-		
Add				
Remove				
2) Change				
Add				
Remove		•		
3) Change		_		
Add				
Remove				***************************************
4) Change		_		
Add				
Remove				
5) Change				
Add	<u>,</u>	_		
Remove				
Komove				
6) Change		_		
Add				
Remove				

spen Kay Naturals, Inc	ts, if necessary). (Be specific)
	was supposed to have an effective date of 1/1/2016 not the date of 12/15/2015. Please correct
fective incorporation da	te to 1/1/2016.
If an amendment pro	vides for an exchange, reclassification, or cancellation of issued shares, menting the amendment if not contained in the amendment itself;
If an amendment pro provisions for imple (if not applicable	menting the amendment if not contained in the amendment itself;
provisions for imple	menting the amendment if not contained in the amendment itself;
provisions for imple	menting the amendment if not contained in the amendment itself;
provisions for imple	menting the amendment if not contained in the amendment itself;
provisions for imple	menting the amendment if not contained in the amendment itself;
provisions for imple	menting the amendment if not contained in the amendment itself;
provisions for imple	menting the amendment if not contained in the amendment itself;
provisions for imple	menting the amendment if not contained in the amendment itself;

	12/23/2015	
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
date tills 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 I document's effective date on the Do	plock does not meet the applicable statutory filing requirements, this capartment of State's records.	late will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment officient for approval.	(s)
	proved by the shareholders through voting groups. The following staten each voting group entitled to vote separately on the amendment(s):	ient
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	opted by the board of directors without shareholder action and sharehold	ler
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated	015 Day (1)	
Signature	hrector, president or other officer - if directors or officers have not been	
	d, by an incorporator – if in the hands of a receiver, trustee, or other con	
appoir	ted fiduciary by that fiduciary)	
	Sheila A. Ernissee	
	(Typed or printed name of person signing)	·
	President	
	(Title of person signing)	