## P16000037828

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	<del>;</del> #)
		MAIL
(Bu	siness Entity Nan	ne)
	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use On	<b>;</b>



05/16/17--01006--008 \*\*43.75



MAY 1 9 2017 T. LEMIEUX

· · · · ·	
	COVER LETTER
TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: NUTRA	SOLANA HEALTH
DOCUMENT NUMBER: <u>PILOOUC</u>	037828
The enclosed Articles of Amendment and fee are sub	omitted for filing.
Please return all correspondence concerning this mat	ter to the following:
<u> </u>	Name of Contact Person
	Firm/ Company
1915	TRADE CTR WAY
	Address
	6, FL 34109 City/State and Zip Code
$\sim$	sellestar. COM sed for future annual report notification)
E-mail address: (to be u	sed for future annual report notification)
For further information concerning this matter, plea	se call:
STEPHEN ALSIP	at (954) 229.4065
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Department of State:
S35 Filing Fee Certificate of Status	\$43.75 Filing Fee &\$52.50 Filing FeeCertified CopyCertificate of Status(Additional copy is enclosed)Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section	Street Address Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

۰. ۱

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

•

. •	
· .	
	Articles of Amendment to
	Articles of Incorporation
	of
NUTRASUL	ANA HEALTH INC.
_	eration as currently filed with the Florida Dept. of State)
P16000	037828
(I	Ocument Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, F ts Articles of Incorporation:	Forida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s)
A. If amending name, enter the new name of	the corporation:
	The new
name must be distinguishable and contain th "Corp." "Inc." or Co." or the designation	word "corporation," "company," or "incorporated" or the abbreviation "Corp," "Inc," or "Co". A professional corporation name must contain the
word "chartered," "professional association,"	
B. Enter new principal office address, if appl	icable:
(Principal office address <u>MUST BE A STREE</u>	TADDRESS )
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFIC	<u>(E BOX</u> )
D. If amending the registered agent and/or r new registered agent and/or the new regi	registered office address in Florida, enter the name of the island
	STEPHEN ALSIP
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	NAPLES, Florida 34109 (City) (Zip Code)
New Registered Agent's Signature, if changi	
I hereby accept the appointment as registered a	agent. I am familiar with and accept the obligations of the position.
	poralsip -
	Signature of New Registered Agent, if changing
· .	
	•

ī.

.

Page 1 of 4

## 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 = Treasuren, S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = ChiefExecutive 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.

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	Ϋ́	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
<u>Type of Action</u> (Check One)	<u>Title</u>	Nam		Address
1) Change	<u>_</u> P	_ <u>_</u>	ERYL CULLURA	3280 6617 St SW NAPLES, FL 34105
Add				NAPLES, 1-L 34105
Kemove				
2) Change				
Add				
Remove		}		
3) Change	····			
Add				
Remove				
4) Change	<u> </u>		·   ] , 	
Add				
Remove				
5) Change	<u>.                                    </u>			
Add				
Remove				·····
6) Change	<u></u>			
Add				
Remove				
			Page 2 of 4	

· · · ·	
E. <u>If amending or adding additional Articles, e</u> (Attach additional sheets, if necessary). (Be	nter change(s) here: pecific)
<u></u>	
F. If an amendment provides for an exchange	reclassification. or cancellation of issued shares.
provisions for implementing the amendm (if not applicable, indicate N/A)	ent if not contained in the amendment itself:
Common	STOCK SHARES: D STEPHEN ALSIP
1006	A STEPHEN ALSIN
/00-	D OTEFTIEN TESTE
	Page 3 of 4

1		
The date of each amendment(s) adoption:		, if other than t
Effective date <u>if applicable</u> :		APRIL 15, 2017 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	ot me State'	et the applicable statutory filing requirements, this date will not be listed as s records.
Adoption of Amendment(s) (CH	<u>eck</u>	<u>ONE</u> )
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for a	sharel ipprov	nolders. The number of votes cast for the amendment(s) val.
The amendment(s) was/were approved by the must be separately provided for each voting	e shar grouj	cholders through voting groups. The following statement p entitled to vote separately on the amendment(s):
"The number of votes cast for the ame	ndmer	nt(s) was/were sufficient for approval
by		"
(vo	(ing g	roup)
The amendment(s) was/were adopted by the action was not required.	board	l of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the action was not required.	incor	porators without shareholder action and shareholder
Dated 4-970	201	$\mp \Omega / $
Signature		m/ S
(By a director, pre		or other officer - if directors or officers have not been
selected, by an inc appointed fiduciat		ator – if in the hands of a receiver, trustee, or other court hat fiduciary)
		d or printed name of person signing)
	11	
	<u>J</u> e	(Title of person signing)
		(The orperson signing)
		Page 4 of 4