P11000058133

(Requestor's Name)	
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(Business Entity Name)	
(Document Number)	
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COVER LETTER

P.O. Box 6327

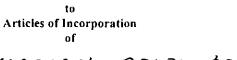
Tallahassee, FL 32314

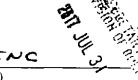
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•		COVER LETTER		33. 37. 17. 17. 17. 17. 17. 17. 17. 17. 17. 1
TO: Amendment Sect Division of Corp				JUS STATES
NAME OF CORPO	RATION:Z/Z	I'S NATURA	L PRODUCTS, INC	基
DOCUMENT NUMI	BER:	170000	58133	\$
The enclosed Articles	of Amendment and fee are su	abmitted for filing.		•
Please return all corre	spondence concerning this ma	atter to the following:		
	212	Name of Contact Perso	n	
		Firm/ Company	BETANCOURT Person PRODUCTS, SNC any BLVD SWTW 644 ORIDA 33030 ip Code ABL. COM report notification) PE STANCOURT ABLE SUPERIOR SUPERIOR Number a Department of State: The State of Status	
	815 N. HO.	MESTUAD BL	vo suite 644	
		Address		
	HOMESTO	RD , FLORI	0A 33030	
		City/ State and Zip Cod	e	
	BLYSSEPP	noquets & 100	COM	
	E-mail address: (to be u	sed for future annual report	notification)	
For further information	n concerning this matter, plea	se call:		
LILIAI	VA BETANCOV	at at 776	546-1233	
			-	
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy	
	ling Address			
	endment Section sion of Corporations		_	

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment





1 L 1 S NATURAL PRODUCTS T (Name of Corporation as currently filed with the Florida Dept. of State)

P170	0005813	3			
(D	ocument Number of C	orporation (if	known)		
Pursuant to the provisions of section 607,1006, Fits Articles of Incorporation:	lorida Statutes, this <i>Fl</i>	orida Profit (Corporation :	adopts the follow	ving amendment(s) to
A. If amending name, enter the new name of t	he corporation:				
					The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "(word "chartered," "professional association," o.	Corp," "Inc," or "Co	". A profess	" or "incorj sional corpo	porated" or the ration name mu	abbreviation st contain the
B. Enter new principal office address, if applic	cable:	395	52 /	71 <i>V LERA</i>	CIRCLE
(Principal office address MUST BE A STREET ADDRESS)					F6 34134
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E BOX)	815 5011	N. 14	0 M & S J U A D V 4	BOULUWIND
					1DA 33030
		·			<u></u> 4 • 30
 If amending the registered agent and/or reg new registered agent and/or the new registered. 		s in Florida,	enter the na	me of the	
Name of New Registered Agent		ALD	505	A	
	3952 (Florida street	address)	<u> </u>	# / N E / O	<u> </u>
New Registered Office Address:	BONITA	500	IN ES	Florida 3	4134
New Registered Office Address:	(C	ity)		(Z)	ip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age		h and accept.	the obligation	ne of the position	**
Thereby decept the appointment as registered age	.m. rum jummu mu	a unu uccepi i	me oongano	ns of the position	<i>t</i> .
	Signature of New Reg			_	
	Signature of New Reg	istered 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> <u>Joh</u>	<u>n Doe</u>	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP	RONALD SUSA	3952 RIVIUAN EIRCH
<u></u> Add			BONITA SPRINGS
Remove			ELORIDA, 33134
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	s, if necessary). (Be s		
	30 /	RONALO	£05A
	50 %	LILIANA	BUGANGOUR
			<u>-</u>
	FET - S	32-20876	7 7
	# L.L ()	12 20010	LL
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		. <u>-</u>	
	: d		-Daties of Course Ask
visions for implem	nenting the amendmen	rectassification, or canci	ellation of issued shares, amendment itself:
if not applicable, i	indicate N/A)		
N/A			
			·

The date of each amendment(s) adoption:	9011	26,	2017	, if other than the
date this document was signed.				
Effective date if applicable:	guc4	26,	2017 Idment file date)	
(1	o more than 90 day.	s after amen	dment file date)	
Note: If the date inserted in this block does not a document's effective date on the Department of Sta		st a tutory fili	ng requirements, this c	date will not be listed as the
Adoption of Amendment(s) (CHEC	CK ONE)			
The amendment(s) was/were adopted by the sha by the shareholders was/were sufficient for approximation of the shareholders was sufficient for approximation of the shareholders was sufficient for the shareholders was sufficie		per of votes	cast for the amendment	(s)
☐ The amendment(s) was/were approved by the sh must be separately provided for each voting gro				nent
"The number of votes cast for the amendm	ent(s) was/were suff	icient for ap	proval	
by				
(voting	group)			
☐ The amendment(s) was/were adopted by the boa action was not required.	ard of directors withou	ut shareholo	der action and sharehold	der
☐ The amendment(s) was/were adopted by the inco- action was not required.	orporators without sh	areholder a	ction and shareholder	
Dated 7/26/	2017	-		
Signatura				
Signature(By a director, presider		f directors o	r officers have not been	
			er, trustee, or other co	
appointed fiduciary by				
41	LIANA	BU	13 NCOUR	L
(Ty	ped or printed name	of person sig	gning)	
	アルム (Title of per	SIDE	N	
	(Title of per	son signing)		