## P17000079505

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: HEAL BY TOUCI	I. INC.	
DOCUMENT NUMI			
	of Amendment and fee are sub	omitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
	Ashley Tinker		
		Name of Contact Person	1
	Heal By Touch, Inc.		
		Firm/ Company	
	2531 US Highway 27 South		
		Address	
	Sebring, Florida 33870		
		City/ State and Zip Code	•
	ashley.healbytouch@gmail.co	חווו	
	E-mail address: (to be use	ed for future annual report	notification)
For further informatio  Ashley N. Tinker	n concerning this matter, pleas		41.1.3088
	<i>C</i>	at (	_) 414-3088
Name of Contact Person Area Code & Daytime Telephone Numl		de & Daytime Telephone Number	
Enclosed is a check for	r the following amount made p	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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ssee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Heal By Touch, Inc.

	of Corporation as currently	filed with the Florida Dep	t. of State)	
P17000079505	(Decument Number of (			
	(Document Number of C	•		
Pursuant to the provisions of section 607 its Articles of Incorporation:	7.1006, Florida Statutes, this <i>FI</i>	orida Profit Corporation ad	dopts the following amendment	t(s) to
A. If amending name, enter the new r	name of the corporation:			
name must be distinguishable and contai			The new	
"Inc.," or Co.," or the designation " "chartered," "professional association,	Corp." "Inc." or "Co". $A$	mpany, or incorporated professional corporation n	or the appreviation Corp., ame must contain the word	
B. <u>Enter new principal office address</u> (Principal office address <u>MUST BE A</u> .				
			ت	
C. Enter new mailing address, if app				
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)	_	<u> </u>	
			بن بن <u>کا</u>	-
			ယ္	
D. If amending the registered agent a	nd/or registered office address	es in Florida, antar the nar		
new registered agent and/or the ne	w registered office address:	som i wirda, enter the har	ac or the	
Name of New Registered Agent	Lon Worth Crow IV Esq.			
	211 North Commerce Avenu	ů.		
	(Hortda-street	address)		
New Registered Office Address:	Sebring		, Florida 33870	
	10	iṇ)\	(Zip Code)	
New Registered Agent's Signature, if o		)		
hereby accept the appointment as regis	tered agent. I am familiar wit	h and accept the obligation.	s of the position.	
	0.44			
	W X			
<del></del>	Signature of New Reg	istered Agent, if changing		
Check if applicable	\			
☐ The amendment(s) is/are being filed p	oursuant to s. 607.0120 (11) (e)	, F.S.		

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)

Example:

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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	PTD	Timothy S. Wheaton	501 Lemans Drive
Add			Sebring, Florida 33872
X Remove			
2) X Change	PSTD	Ashley N. Tinker	1720 Elf Drive
Add			Sebring, Florida 33875
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		<del></del>	
Add			
Remove			
6) Change			
Add			
Remove			

	adding additional Articles, enter change(s) here: al sheets, if necessary). (Be specific)
	_ <del>.</del>
•	
• •	
-	
f an amendmer	nt provides for an exchange, reclassification, or cancellation of issued shares,
provisions for i	implementing the amendment if not contained in the amendment itself:
(ij noi appii	icable, indicate N/A)

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October 1, 2020
The date of each amendment(s) adoption:, if other than the
date this document was signed.
October 1, 2020
Effective date if applicable:  (no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
October 1, 2020 Dated
Signature 7 dall W
(By a director, president or other officer – if directors or officers have not been
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
appointed reductary by that reductary)
Ashley N. Tinker
(Typed or printed name of person signing)
President, Secretary, Director

(Title of person signing)