P17DDD084481

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Living Better Bra	nds, Inc.			
DOCUMENT NUMB	ER: <u>P17000084481</u>				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
		Scott Simmering			
		Name of Contact Persor	1		
_		Living Better	Brands, Inc.		
		Firm/ Company			
_		909 Bay (Cliffs Rd		
	Address				
		Gulf Bre	eze, FL 32561		
	•	City/ State and Zip Code	e		
	E-mail address: (to be us	ssimmering@ sed for future annual report	notification)		
		·			
For further information	concerning this matter, please	se call:			
Scott Simmering	3	at (850) 686-5574		
Name o	f Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	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)	Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address			Address		
Amendment Section		Amendment Section			
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building			
Tallahassee, FL 32314			xecutive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation**

L	IVING BETTER BRANDS, INC.		
(Name of Corporation a	s currently filed with the Florida Dep	. of State)	
	P17000084481		· · · · · · · · · · · · · · · · · · ·
(Document	Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statista Articles of Incorporation:	tutes, this <i>Florida Profit Corporation</i> ac	iopts the fo	llowing amendment(s) to
A. If amending name, enter the new name of the corpo	ration:		
N/			The new
name must be distinguishable and contain the word " "Corp.," "Inc.," or Co.," or the designation "Corp," " word "chartered," "professional association," or the abb	Inc," or "Co". A professional corpore	orated" or ation name	the abbreviation must contain the
B. Enter new principal office address, if applicable:	**************************************	N/A	
(Principal office address <u>MUST BE A STREET ADDRE</u>	<u>SS</u>)		
			<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	
· · · · · · · · · · · · · · · · · · ·			
			
		·	
D. If amending the registered agent and/or registered		ne of the	
new registered agent and/or the new registered offi	ce address:		
Name of New Registered Agent	SCOTT SIMMERING	<u>_</u> _	
	909 BAY CLIFFS ROAD		
· · · · · · · · · · · · · · · · · · ·	(Florida street address)		
New Registered Office Address:	GULF BREEZE	, Florida	32561
	(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 obligations of the position.

Signature of New Registered 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>	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>		Addres	s
1) X Change	CEO		FREDRICK R LEWTER		1106 HARBOR LANE
Add					GULF BREEZE, FL 32563
Remove					
2) X Change	PST		SCOTT T SIMMERING		909 BAY CLIFFS ROAD
Add				·	GULF BREEZE, FL 32563
Remove					
3) Change	-			<u> </u>	
Add					
Remove					
4) Change					
Add					
Remove					
5) Change		<u> </u>			
Add					
Remove					
6) Change					
Add				-, , . , . , , , , , , , , , , , , , , , , , ,	
Remove					

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
<u></u>	
· · · · · · · · · · · · · · · · · · ·	
provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
NA	
N/A	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> : 12/1/2017	
(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 w document's effective date on the Department of State's records.	ill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☑ 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" (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 12/1/17 Signature	
Signature	
(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)	
Scott Simmerine	
(Typed or printed name of person signing)	**************************************
PRES, DENT	
(Title of person signing)	