## P180000 26807

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SECRETARY OF STAIL
ALL AHASSEF, FLORIDA

FILED

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	W+N Supplements	s. Inc		
DOCUMENT NUMB	P18000026807 ER:			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	Alejandro Aguilar			
		Name of Contact Person	1	<del></del>
	W+N Supplements, Inc			
		Firm/ Company		
	2645 Executive Park Drive. S	Ste 416		7A(S)
	Weston, FL 33331	Address		MIS JAN 18 A
	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Code	e	(5) (8)
alejan	dro@wnsupplements.com			1 = 1 P
For further information	E-mail address: (to be us	sed for future annual report	notification)	3: 19 LORIDA
Alejandro Aguilar		786 at (	5105850	
Name of 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:	
S35 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)	
Ame Divi P.O.	ndment Section sion of Corporations Box 6327 shassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

W+N Supplements, Inc			
(Name of Corporate P18000026807	tion as currently filed with	the Florida Dept. of State)	
(Docu	iment Number of Corporation	n (if known)	
Pursuant to the provisions of section 607.1006, Floridits Articles of Incorporation:	da Statutes, this <i>Florida Proj</i>	fit Corporation adopts the fol	lowing amendment(s) to
A. If amending name, enter the new name of the own WPN Supplements, Inc	corporation:		The new
name must be distinguishable and contain the wo "Corp" "Inc" or Co.," or the designation "Corpword "chartered," "professional association," or the	p," "Inc," or "Co". A pro		the abbreviation
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD			<del></del>
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE Bo</u>	<u>OX</u> )	TALLAHASSEL	
D. If amending the registered agent and/or registered new registered agent and/or the new registered		da, enter the name of the	
Name of New Registered Agent			
	(Florida street address)		<del></del>
New Registered Office Address:	(City)	, Florida	(Zip Code)
New Registered Agent's Signature, if changing Relatively accept the appointment as registered agent.		ept the obligations of the posi	tion.
Sie	nature of New Registered As	ent, if changing	<del></del>

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>	<u>Addres</u> s	7	
1) Change		_		· · · · · · · · · · · · · · · · · · ·	
Add					
Remove				· 	
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Add			<i></i>	AT T	
Remove				<u> </u>	Π
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Add					
Remove				7	
4) Change					
Add			<del></del>		
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5) Change		_/	<del></del>		
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Remove					
6) Change				· · · · · · · · · · · · · · · · · · ·	
Add					
Remove			····		

E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)		
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If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	_	
provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)		
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The date of each amendment(s) adoption:	, if other than th
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, the document's effective date on the Department of State's records.	is date will not be listed as th
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	ent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following standard 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)	7. 2
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	TALE JAN 18
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholde action was not required.	
1/14/2019	of Si
Dated	TAIL DRIDE
Signature 9	<u> </u>
(By a director, president or other officer - if directors or officers have not b	
selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	court
Alejandro Aguilar	
(Typed or printed name of person signing)	
President President	
(Title of percap signing)	