## P18000026807

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	WPN Supplement	s, Inc			
DOCUMENT NUM	P18000026807				
	of Amendment and fee are su				
	•	-			
ricase return an corre	spondence concerning this ma	tter to the following:			
	Alejandro Aguilar				
	Name of Contact Person				
WPN Supplements					
	2645 Executive Park Dr., Ste	Firm/ Company 416			
		Address			
	Weston, FL 33331				
		City/ State and Zip Cod	e		
aleja	ndro@wpnsupplements.com				
<del></del>	E-mail address: (to be us	sed for future annual report	notification)	المنظ المنظمة المعلمة المنطقة	
			•	9 A	
For further informatio	n concerning this matter, pleas	se call:		<b>20</b>	
Alejandro Aguilar		786 at (	5105850		
Name of Contact Person Area Code & Daytime Telephone Number		- == : - = :			
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	artment of State:	1 PH 1: 17	
■ \$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		Ameno Divisio Cliftor	Address  Iment Section on of Corporations In Building Executive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

WPN Supplements, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State) P18000026807 (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (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>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Address</u>
X 1) Change	P	ARIEL PELLADO	2645 EXECUTIVE PARK DR
Add			STE 416
Remove			WESTON, FL 33331
X 2) Change	V	ALEJANDRO AGUILAR	2645 EXECUTIVE PARK DR
Add	<del></del>	-	STE 416
			WESTON, FL 33331
Remove			
3) Change			
Add			
Remove			
4) Change	<del></del> -		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	-		
Add			
Remove			

		*.	
If an amendment provides for an exchange provisions for implementing the amendment (if not applicable, indicate N/A)	e, reclassification, or canc ent if not contained in the	ellation of issued sha amendment itself:	ares,
		<del></del> -	<del>.</del>
	<u> </u>		

The date of each amendment(s)	adoption:	, if other than the
date this document was signed. 4/1	5/2019	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date we partment of State's records.	rill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were adaction was not required.	lopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adaction was not required.	lopted by the incorporators without shareholder action and shareholder	
4/9/2019	<b>, , ,</b>	
DatedSignature	ton to	
(By a select	director, president on other officer—if directors or officers have not been ed, by an incorporator—if in the hands of a receiver, trustee, or other count need fiduciary by that fiduciary)	<del></del>
	ALEJANDRO AGUILAR	
	(Typed or printed name of person signing) PRESIDENT	
	(Title of person signing)	•