Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973

Fax Number : (305)675-5944

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN EXCELLENT HEALTH OPTIONS INC

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APR - 3 2018

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Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment Articles of Incorporation

EXCELLENT HEALTH OPTIONS INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P18000027047

ient(s) to

A. If amending name, enter the new name of the corporation	<u>:</u>
N/A	The ne
name must be distinguishable and contain the word "corpor" "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," word "chartered," "professional association," or the abbreviati	or "Co". A professional corporation name must contain to
B. Enter new principal office address, if applicable:	3850 SW 87TH AVENUE, SUITE 305
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	MIAMI, FL 33165
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3850 SW 87TH AVENUE, SUITE 305
	MIAMI, FL 33165
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office add	
new registered agent and/or the new registered office add	
new registered agent and/or the new registered office add	
new registered agent and/or the new registered office add	ress: N/A- a street address), Florida
new registered agent and/or the new registered office add Name of New Registered Agent (Florid	ress: N/A- a street address)
new registered agent and/or the new registered office add Name of New Registered Agent (Florid New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent	Tess: N / A- a street address) , Florida (City) (Zip Code)
new registered agent and/or the new registered office add Name of New Registered Agent (Florid New Legistered Office Address:	Tess: N / A- a street address) , Florida (City) (Zip Code)
new registered agent and/or the new registered office add Name of New Registered Agent (Florid New Legistered Office Address: New Registered Agent's Signature, if changing Registered Agent	Tess: N / A- a street address) , Florida (City) (Zip Code)

3052201440

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, Mke 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, Y as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	Iohn Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1)Change	e VP	JULIO ENRIQUEZ	11970 SW 92 LANE
Add			MIAMI, FL 33186
XX Remo	ve		
2) Charge	e	_	
Add			
Remo	v e	•	
3) Chang	ge		
Add			
Remo	ve		
4) Charge	e		
Add			
Remo	ve		
5)Chan	c <u> </u>		
Add			
Remo	ve		
6) Chan	c		
Add			
Remo	ve		

E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)
NA
F. If an amen ment provides for an exchange, reclassification, or cancellation of issued shares,
provisional for implementing the amendment if not contained in the amendment itself.
(if not applicable, indicate N/A)
N/A

LAZARUS CORPORATE

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04/02/2018

15:33

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(Typed or printed name of person signing)

(Title of person signing)

PRESIDENT