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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: ALTERNATIVE	MEDICINE INC			
DOCUMENT NUM	D10000024670				
The enclosed Article	s of Amendment and fee are si	abmitted for filing.			
Please return all corr	espondence concerning this ma	atter to the following:			
	JEFFREY MATTHEWS				
		Name of Contact Person	1		
	ALTERNATIVE MEDICINE INC				
	Firm/ Company				
	5033 W LAUREL ST				
	Address				
	TAMPA FL 33607				
		City/ State and Zip Code	2		
jmat	111722@aol.com				
	E-mail address: (to be u	sed for future annual report	notification)		
For further information	on concerning this matter, plea	se call: at (744-5510		
Name	of Contact Person	Area Coo	de & Daytime Telephone Number		
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	irtment 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)		
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Division The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303		

Articles of Amendment to Articles of Incorporation of

ALTERNATIVE MEDICINE INC

(Name of Corporati	on as currently	filed with the Fl	orida Dept. of Si	tate)		
P19000034679						
(Docum	nent Number of	Corporation (if kr	nown)			
Pursuant to the provisions of section 607,1006, Floridatist Articles of Incorporation:	i Statutes, this F	Torida Profit Corp	poration adopts the	he followi	ng amendm	ent(s) to
A. If amending name, enter the new name of the co	orporation:					
		 			_The nev	
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc." "chartered," "professional association," or the abbre	" or "Co". A	ompany," or "inco professional corp	rporated" or the poration name n	abbreviat iust conta	ion "Corp., in the wor	 d
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD						
					. 2	
		· · · · · · · · · · · · · · · · · · ·		<u> </u>	0	
Enter new mailing address, if applicable:				<i>}</i>	DE (•
(Mailing address MAY BE A POST OFFICE BO.	<u>X</u>)			· · · · · · · · · · · · · · · · · · ·		• :
					\sim	
				.	_ 	. •
D. If amending the registered agent and/or register new registered agent and/or the new registered of		ss in Florida, ent	er the name of t	<u>he</u>	24	
Name of New Registered Agent					_	
		-				
	(Florida stree	(address)			_	
New Registered Office Address:			, Floric	ia		
new negative Office mareas.	((Tity)	1 10/10		Code)	
New Registered Agent's Signature, if changing Reging hereby accept the appointment as registered agent.	stered Agent:	els and a same els	-11:			
посоту иссерстве артопитет аз гедімегей адет. П	ат затиат Ми	т апа ассері те (vougations of the	position.		
Signa	ture of New Rec	istered Agent, if c	hanaina		_	

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		
<u>X</u> Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
!) Change	VP	TOMISLAV MARJANOVIC JR	2730 HAVERHILL CT	
Add			CLEARWATER FL 33761	
X Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove			<u></u>	
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				
		Page 2 of 4		
E. If amending or addir (Attach additional shee	ig addition	onal Articles, enter change(s) here: cessary). (Be specific)		

		····
		<u> </u>
		
		·
F. If an amendment provides for an exchar provisions for implementing the amend (if not applicable, indicate N/A)	nge, reclassification, or cancellation of issued shares, Iment if not contained in the amendment itself:	
		
		
	· ·	_ -
		
	Page 3 of 4	
	·	
The date of each amond		
the date of each amendment(s) adoption: _ date this document was signed.		, if other than th
and and document was signed.		
Effective date <u>if applicable</u> :	(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)	(<u>CHECK ONE</u>)
The amendment(s) was/were adopted by by the shareholders was/were sufficient The amendment(s) was/were sufficient The amendment(s) was/were adopted by	the shareholders. The number of votes cast for the amendment(s) for approval.
	by the shareholders through voting groups. The following statement of the 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)
action was not required.	the board of directors without shareholder action and shareholder
The amendment(s) was/were adopted by action was not required.	the incorporators without shareholder action and shareholder
Dated	
	Inij Hallten
selected, by an	president or other officer – if directors or officers have not been incorporator – if in the hands of a receiver, trustee, or other court clary by that fiduciary)
DANIJ	ELA MATTHEWS
	(Typed or printed name of person signing)
VICE F	PRESIDENT
(Title of	person signing)