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FALL ARASSES, FLORIDA

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	ION:	WISS VITALITY INC				
DOCUMENT NUMBER	P1900045201					
The enclosed Articles of A	<i>mendment</i> and fee are su	bmitted for filing.				
Please return all correspon	dence concerning this ma	tter to the following:				
		Robbie Hicks				
Name of Contact Person						
	SWI	SS VITALITY INC				
		Firm/ Company				
8411 W Oakland Park Blvd Suite #201						
Address						
Sunrise, FL 33351						
		City/ State and Zip Cod	<u> </u>			
For further information cor	-	sed for future annual report	notification)			
Robbie Hicks		754 at {	de & Daytime Telephone Number			
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	☐S43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 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 Building Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

SWISS VITALITY INC

(Name o	f Corporation as curren	tly filed with the Florida Dept. of St.	ate)			
	P19000	045201				
	(Document Number	of Corporation (if known)	· · ·			
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Sta tutes , thi	s Florida Profit Corporation adopts th	ie following amendn	nent(s)		
A. If amending name, enter the new na	me of the corporation:					
			The ne			
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	"Co". A professional corporation no	or the abbreviation of the open of the contain the con	m he		
B. Enter new principal office address, if applicable:		8411 W Oakland Park Blvd #201		_		
(Principal office address <u>MUST BE A S</u>		Sunrise, FL 33351				
			20 SEU	•		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		8411 W Oakland Park Blvd #201	JAN - 3	<u> </u>		
		Sunrise, FL 33351	::: ≥ i	7		
				ל		
			- S	•		
 If amending the registered agent an new registered agent and/or the new 						
Name of New Registered Agent	Nataliya Kirk					
	8411 W Oakland Park Blvd #201					
	(Florida :	street address)				
New Registered Office Address;	Sunrise	, Florid	33351 ta	_		
		(City)	(Zip Code)			
New Registered Office Address;	Sunrise			-		
<u>New Registered Agent's Signature, if c</u> I hereby accept the appointment as regist	hanging Registered Age ered agent. I am familia	nt: r with and accept the obligations of the	position.			
	Vatador .	Registered Agent, if changing				
	Signiture 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: \underline{X} Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
() Change			
Add			
Remove			7/SE
2) Change			20 JAN SECREID
Add			22 d F
Remove			HA CONTRACTOR
3) Change			
Add			(D)
Remove			
4) Change			
Add			
Remove			
5/ Change			
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding additional Articles, enter tach additional sheets, if necessary).—(Be spec	cific) — —					
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f an amendment provides for an exchange, rec provisions for implementing the amendment i	if not cont	on, or cance ained in the	amendmen	t itself:		
(if not applicable, indicate N/A)						
				··		
		,				
		,				

The date of each amendment(s) adoption:date this document was signed.	, il	other than the
date itus document was signed.		
Effective date <u>if applicable</u> :	I and I am I am Glader	
(no i	more than 90 days after amendment file date)	
Note: If the date inserted in this block does not med document's effective date on the Department of State's	et the applicable statutory filing requirements, this date will not s records.	be listed as the
Adoption of Amendment(s) (CHECK	ONE)	
☐ The amendment(s) was/were adopted by the shareh by the shareholders was/were sufficient for approv	nolders. The number of votes cast for the amendment(s) ad.	
The amendment(s) was/were approved by the share must be separately provided for each voting group	cholders through voting groups. The following statement o entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendmen	a(s) was/were sufficient for approval	
by		
by	оир)	
The amendment(s) was/were adopted by the board action was not required.	of directors without shareholder action and shareholder STEC	}
☐ The amendment(s) was/were adopted by the incorpaction was not required.	porators without shareholder action and shareholder	FILED
09/17/2019		m
Signature)) 1		D
(Bya director, president	or other officer – if directors or officers have not better to a receiver, trustee, or other court nat fiduciary)	
DAN	ORAN	
(Type	d or printed name of person signing)	
Pres:	dent	
	(Title of person signing)	