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| (Requestor's Name) |
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| |
| (Address) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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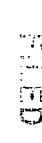
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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR | ATION: TORNASOL REA | LTY INC | | | |
|--|---|--|---|--|--|
| DOCUMENT NUMB | P19000051393 | | | | |
| The enclosed Articles of | of Amendment and fee are su | abmitted for filing. | | | |
| Please return all corres | pondence concerning this ma | tter to the following: | | | |
| 1 | FERNANDEZ, JOSE E | | | | |
| - | | Name of Contact Person | n | | |
| - | Firm/ Company | | | | |
| | 4838 NW 57TH LN | | | | |
| - | | Address | | | |
| (| CORAL SPRINGS, FL 3306 | 7 | | | |
| - | | City/ State and Zip Cod | e | | |
| joferta | 82@gmail.com | | / | | |
| | E-mail address: (to be us | sed for future annual report | notification) | | |
| For further information JOSE E. FERNANDEZ | concerning this matter, please | se call: 786 | 537-0279 | | |
| Name o | f Contact Person | | de & Daytime Telephone Number | | |
| Enclosed is a check for | the following amount made | | • | | |
| 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) | | |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | Amend Divisio Clifton 2661 E | Address Iment Section on of Corporations Building executive Center Circle ussee, FL 32301 | | |

Articles of Amendment to Articles of Incorporation of

| TORNASOL REALTY INC | | | | | |
|--|---|--------------------------------|--------------------------------------|--------------|-----------------------|
| (<u>Name</u> P19000051393 | of Corporation as curren | tly filed with the Florid | la Dept. of State) | | |
| | (Document Number | of Corporation (if known | <u> </u> | | |
| D com | · | • ` | , | | |
| Pursuant to the provisions of section 607 its Articles of Incorporation: | .1006, Florida Statutes, thi | s Florida Profit Corpord | ation adopts the fol | llowing amen | idment(s) t |
| A. If amending name, enter the new n | ame of the corporation: | | | | |
| JOSE HQ NUTRITION CORP | | | | ✓ The | new. |
| name must be distinguishable and cor "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa | nation "Corp," "Inc," or | "Co". A professional e | incorporated" or corporation name | the abbrevia | ation |
| B. Enter new principal office address. | | N/A | | | _ |
| (Principal office address <u>MUST BE A S</u> | TREET ADDRESS) | | | | J |
| | | | | 40 E | <u> </u> |
| C. E | | | | | - |
| C. Enter new mailing address, if appl (Mailing address MAY BE A POST | | N/A | | (| د نده ۱ مسه ۱ ن |
| | | | - · · · · · | 22 | 9 51 |
| | | | <u>-</u> | 777 | 7) (m |
| | | | - | (1) | >> |
| If amending the registered agent an new registered agent and/or the ne | nd/or registered office address | dress in Florida, enter t | he name of the | 111 | |
| | N/A | <u></u> | | | |
| Name of New Registered Agent | | | | _ | |
| | (Florida s | treet address) | | | |
| V 10 1 1000 111 | N/A | reer auaressy | | | |
| New Registered Office Address: | | (City) | , Florida | (Zip Code) | _ |
| | | | | • / | |
| New Registered Agent's Signature, if e I hereby accept the appointment as regis: | hanging Registered Agen tered agent. I am familiar | t: with and accept the obli | gations of the posi | tion. | |
| | | | | | |
| | Signature of New | Registered Agent, if char | iging | | |

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.

| X Change | <u>PT</u> <u>Joh</u> | nn Doe | |
|-------------------------------|----------------------|-------------|----------|
| X Remove | <u>V</u> <u>Mi</u> | ke Jones | |
| X Add | <u>SV</u> <u>Sal</u> | ly Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | Address |
| 1) Change | | | |
| Add | | | |
| Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove | | | |
| 3) Change | <u> </u> | | <u> </u> |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| E. <u>If ame</u> | ending or adding additional Art | icles, enter change(s | <u>) here</u> : | | |
|------------------|-------------------------------------|-----------------------|-------------------|------------------|---------|
| | h additional sheets, if necessary). | (Be specific) | | | |
| N/A | | | | | |
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| F. Ifans | amendment provides for an excl | ange reclassificatio | n or cancellation | of issued shares | |
| prov | isions for implementing the ame | ndment if not contai | ned in the amend | ment itself: | |
| (| (if not applicable, indicate N/A) | | - | _ | |
| N/A | | | | | |
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| The date of each amendment(s) | adoption: | , if other than the |
|---|--|---------------------------|
| date this document was signed. | | |
| | /01/2019 | |
| 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 I | block does not meet the applicable statutory filing requirements, this date volument of State's records. | will not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| The amendment(s) was/were ac by the shareholders was/were | dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval. | |
| | pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s): | |
| "The number of votes cas | st for the amendment(s) was/were sufficient for approval | |
| by | | |
| , | (voting group) | |
| action was not required. | dopted by the board of directors without shareholder action and shareholder dopted by the incorporators without shareholder action and shareholder | |
| action was not required. | topica by the meorporators without shareholder action and shareholder | |
| 08/29/201 | 9 | |
| Dated | | |
| G: | Au | |
| Signature | director, president or other officer – if directors or officers have not been | |
| select | ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary) | |
| | JOSE E. FERNANDEZ | |
| | (Typed or printed name of person signing) | |
| | PRESIDENT | |
| | (Title of person signing) | |