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(R	equestor's Name)			
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PICK-UP	☐ WAIT	MAIL		
(B	usiness Entity Name	e)		
(Document Number)				
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COVER LETTER

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: Acuheal Wellness Inc. DOCUMENT NUMBER: P 210 000 35392
DOCUMENT NUMBER: P 210 000 3539 2
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Debora S. de Sousa Name of Contact Person
Firm/ Company 76 Brittany B
Delray Beach FL 33446 City/ State and Zip Code
Sayuri. Sousa @ hotmail. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Debora 5. de Sousa at 704 345-1184 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certificate of Status (Additional copy is enclosed) Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

Acuheal	Wellness	Inc.	
^		filed with the Florida Dept. of State)	
<u> </u>			
	(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this F	orida Profit Corporation adopts the following	ng amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
Seed of Hea	Ith Inc.		The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Contain "chartered," "professional association,"	Corp," "Inc," or "Co". A	mpany," or "incorporated" or the abbreviati professional corporation name must conta	on "Corp.,"
		(255) 255 + 2 6 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Ruch RIV
B. Enter new principal office address, (Principal office address MUST BE A S		255 #B George Delray Beach, FL	33444
D. If amending the registered agent an new registered agent and/or the new registered agent and registered agent a	d/or registered office addre	ss in Florida, enter the name of the	12
Name of New Registered Agent	NIA		ā
Name of New Negssierea Agent			
	(Florida stree	t address)	_ M
New Registered Office Address:			₹ 🗆
New Registered Office Address:		; Florida :: (ity) ; [Zip]	Code)
		· · · · · · · · · · · · · · · · · · ·	_
New Registered Agent's Signature, if cl I hereby accept the appointment as registe	hanging Registered Agent: ered agent. I am familiar wit	h and accept the obligations of the position.	
	Signature of New Reg	istered Agent, if changing	_

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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>	John Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name i 1	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change			
Add			
Remove Change			
Ad d			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		-	
Add			
Remove			

NIA	r adding additional A nal sheets, if necessary,). (Be specific)	HA) HELE.		
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f an amendme	implementing the on	rendment if not con-	tained in the amen	inent itself	
f an amendme			yantes ju tut singen.	anicate teachi.	
provisions for	licable, indicate N/A)				
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provisions for	licable, indicate N/A)				
provisions for	licable, indicate N/A)				
If an amendment provisions for (if not app	licable, indicate N/A)				

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The date of each a	mendment(s) adoption:	, if other than the
date this document	was signed.	
Effective date if ar	pplicable:	
	(no more than 90 days after amendment file date)	
Note: If the date is document's effective	inserted in this block does not meet the applicable statutory filing requirements, this date we date on the Department of State's records.	will not be listed as the
Adoption of Amen	ndment(s) (CHECK ONE)	
The amendment action was not re	(s) was/were adopted by the incorporators, or board of directors without shareholder action equired.	and shareholder
☐ The amendments by the sharehold	(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) ders was/were sufficient for approval.	
☐ The amendment must be separate	(s) was/were approved by the shareholders through voting groups. The following statementely provided for each voting group entitled to vote separately on the amendment(s):	t
"The numb	ber of votes cast for the amendment(s) was/were sufficient for approval	
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
,	(voting group)	
D	ignature <u>Debora 5'- de</u> Sousa.	
Si	ignature Debora 5'- de Souga.	
	(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	Debona S. de Sousa.	
	(Typed or printed name of person signing)	
	Presidente	
	(Title of person signing)	