P21000056546

| (Requestor | r's Name) |
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| Certified Copies C | Certificates of Status |
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| Special Instructions to Filing C | Officer; |
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

| INC. | | | |
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| | | | |
| submitted for filing. | | | |
| natter to the following: | | | |
| | | | |
| Name of Contact Person | n | | |
| | | | |
| Firm/ Company | ···· | | |
| .VD., STE. 315 | | | |
| Address | | | |
| 7 | | | |
| City/ State and Zip Cod | e | | |
| KLAW.COM | | | |
| used for future annual report | notification) | | |
| ease call: | , 252-7529 | | |
| at (Area Co | at (813) 252-7529 Area Code & Daytime Telephone Number | | |
| le payable to the Florida Dep | | | |
| □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | | |
| Ameno Divisio | Address Iment Section on of Corporations | | |
| The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 | | | |
| | Name of Contact Perso Firm/ Company Address City/ State and Zip Cod KLAW.COM used for future annual report ease call: at (813 Area Co e payable to the Florida Dep \$\int\text{S43.75 Filing Fee & Certified Copy} (Additional copy is enclosed) Street Ameno Division | | |

Tallahassee, Fl. 32303

Articles of Amendment to Articles of Incorporation of

LIVE BETTER, INC.

| LIVE BETTER, INC. | | |
|--|--|-----------------|
| | ration as currently filed with the Florida Dept. of State) | |
| P21000056546 | | |
| (Doc | cument Number of Corporation (if known) | |
| Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation: | rida Statutes, this Florida Profit Corporation adopts the following | amendment(s) to |
| A. If amending name, enter the new name of the | e corporation: | |
| | | The new |
| | "corporation," "company," or "incorporated" or the abbreviation ne," or "Co". A professional corporation name must contain breviation "P.A." | |
| B. Enter new principal office address, if applica | | |
| (Principal office address <u>MUST BE A STREET A</u> | DDRESS) | |
| | | |
| | v | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) | R/N/1 | |
| (maining dualess may be A FOST OF FIEL) | <u></u> | |
| | | 292 |
| | | (7) |
| D. If amending the registered agent and/or regis | stered office address in Florida, enter the name of the | N) Hatta |
| new registered agent and/or the new register | red office address: | La tare |
| Name of New Registered Agent | M.C. | 골 [[] |
| | | |
| | | 52 |
| New Registered Office Address: | , Florida | |
| New Register Commences. | (City) (Zip Ce | pde) |
| | | |
| | | |
| New Registered Agent's Signature, if changing Is I hereby accept the appointment as revistered agen | Registered Agent: a. I am familiar with and accept the obligations of the position. | |
| , | | |
| | | |
| | | |
| Si | ignature of New Registered 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 | \underline{PT} | John Doe | |
|-------------------------------|------------------|----------------|-------------------------|
| X Remove | <u>V</u> | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | РТ | DAVID TOBACK | 1211 N. WESTSHORE BLVD. |
| Add | | | STE. 315 |
| X Remove | | | TAMPA, FL 33607 |
| 2) Change | PTS | PATRICK MARTIN | 1211 N. WESTSHORE BLVD. |
| X Add | | | STE. 315 |
| Remove 3) Change | | | TAMPA, FL 33607 |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| | if necessary), | (Be specific) | | | |
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| | option: | , if other than the |
|--|--|--|
| date this document was signed. | | |
| Effective date <u>if applicable</u> : | (no more than 90 days after amendment file dat | |
| | (no more than 50 days after amenament fue dat | <i>c)</i> |
| Note: If the date inserted in this bl document's effective date on the De | ock does not meet the applicable statutory filing requirement of State's records. | nts, this date will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were ado action was not required. | oted by the incorporators, or board of directors without share | sholder action and shareholder |
| ☐ The amendment(s) was/were ado by the shareholders was/were su | oted by the shareholders. The number of votes cast for the a ficient for approval. | mendment(s) |
| | roved by the shareholders through voting groups. The followeach voting group entitled to vote separately on the amendm | |
| "The number of votes cast | or the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | (voting group) | |
| Dated 9//8 | 12021 M~~ | |
| | | |
| selected | rector, president or other officer – if directors or officers hav , by an incorporator – if in the hands of a receiver, trustee, o ed fiduciary by that fiduciary) | |
| | DAVID TOBACK | |
| • | (Typed or printed name of person signing) | |
| | PRESIDENT | |
| | (Title of person signing) | |