## P21000093676

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## COVER LETTER ;

TO: Amendment Ser Division of Cor			*
NAME OF CORPO	RATION: ADVISORS4LIFE	E CORPORATION	
	BER: P21000093676		
The enclosed Article	s of Amendment and fee are so	ibmitted for tilling.	
Please return all corre	espondence concerning this ma	itter to the following:	
	LORENA GRANADILLO I	DE FERNANDEZ	
		Name of Contact Person	1
	VP		
		Firm/ Company	
	822 BRIAR RIDGE ROAD	. ,	
		Address	
	WESTON, FL 33327		
		City/ State and Zip Code	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
LORENA GRANAD	ILLO DE FERNANDEZ	at ( 954 Dayligh	le & Daytime Telephone Number
Name	of Contact Person	Area Coo	le & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	rtment of State:
S35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	S43.75 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, F1, 32314	Divisior The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee f. Monroe Street, Suite 810 ssee, FL 32303

## Articles of Amendment to Articles of Incorporation of

ADVISORS4LIFE CORPORATION

( <u>Name</u> P21000093676	of Corporation as currer	tly filed with the Florida Do	ept. of State)	
7210007.070	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:		• • •	adopts the following amendment(s) t	
A. If amending name, enter the new n	ame of the corporation:			
Not Applicable			71	
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp, Inc, or Co	A professional corporation	The new l' or the abbreviation "Corp.," name must contain the word	
B. Enter new principal office address,	if applicable:	Not Applicable		
(Principal office address <u>MUST BE A</u> S	TREET ADDRESS )		<del></del>	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST)  D. If amending the registered agent an new registered agent and/or the new	OFFICE BOX) nd/or registered office ad-	Not Applicable  Iress in Florida, enter the man	ame of the	
Name of New Registered Agent	Not Applicable	<del></del>		
Mark Mark Mark Mark Mark Mark Mark Mark	Not Applicable			
	(Florida s	reet address)		
New Registered Office Address:	Not Applicable		Florida Not Applicable	
		(City)		
New Registered Agent's Signature, if cl Thereby accept the appointment as registe	hanging Registered Agen ered agent. I am familiar	t: with and accept the obligatio	ous of the position.	
	Simulation of M-	Registered Agent, if changing	<del></del>	

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)

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 Do	<u>oe</u>			
X Remove	<u>V</u>	Mike Jo	<u>ones</u>			
X Add	<u>sv</u>	Sally Si	nith			
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s	
1) Change	1		EURO GRANADILLO CURIEL		1265 SABAL TRAIL	
X Add		_			WESTON, FL 33327	
Remove					. 41.25	
2) Change		<u> </u>			<u> </u>	
Add						
Remove 3 ) Change		<del></del> -				
Add						
Remove						
4) Change						
Add						
Remove						
5) Change		_		<del></del>		
Add						
Remove					<del></del>	
6) Change						
Add						
Remove						

	ts, if necessary). (h	or specific)				
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<u>en amendment pro</u>	vides for an exchan	ge, reclassificati	on, or cancellati	<u>on of issued sha</u>	res,	
ovisions for imple	menting the amendi	<u>ment if not conta</u>	<u>iined in the ame</u>	ndment itself:		
(if not applicable	, indicate N/A)					
					* u . <u>—</u>	
	<u> </u>		·	<del></del>		
		<del>.</del> .				<u> </u>

• • •

The date of each amendment(s) adop date this document was signed.	tion:		, if other than the
Effective date if applicable:			
	(no more than 90 c	days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depar	c does not meet the applicatiment of State's records.	ble statutory filing requirements, this date v	vill not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )		
The amendment(s) was/were adopte action was not required.	d by the incorporators, or bo	oard of directors without shareholder action a	ind shareholder
☐ The amendment(s) was/were adopte by the shareholders was/were suffic		number of votes east for the amendment(s)	
☐ The amendment(s) was/were approving the must be separately provided for each	red by the shareholders through voting group entitled to vo	igh voting groups. The following statement ote separately on the amendment(s):	
"The number of votes east for	the amendment(s) was/were	sufficient for approval	
<b>b</b> y	(voting group)	·"	
selected, b appointed	tor, nestignt or other office y an incurporator if in the fiduciary by that ilduciary) ORENA GRANADILLO DE	er – if directors or officers have not been hands of a receiver, trustee, or other court E FERNANDEZ	
	(Typed or printed no	ame of person signing)	
VI	CE - PRESIDENT		

(Title of person signing)