P21000103911

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COVER LETTER

TO: Amendment Section Division of Corporations

LIFE X BEHAVIOR INC NAME OF CORPORATION:	
P21000103911 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing.	· · · · · · · · · · · · · · · · · · ·
Please return all correspondence concerning this matter to the following:	
ROBERTO FALCON	
(Name of Contact Person)	
LIFE X BEHAVIOR INC	
(Firm/ Company)	
2055 WOOD ST SUITE 104	
(Address)	
SARASOTA, FL 34237	
(City/ State and Zip Code)	
falconr23md@hotmail.com	
E-mail address: (to be used for future annual report notification)	202
for further information concerning this matter, please call:	2022 AUG
ROBERTO FALCON 786.374.5868	
	nie Telephone Number) :
Enclosed is a check for the following amount made payable to the Florida Department of State:	ÿ ·
■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Certificate of Status Certified Copy Certificate of Status Certified Copy Certified Copy Certified Copy (Additional Copy is enclosed) Enclosed)	Status '

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, Fl. 32303

Articles of Amendment to Articles of Incorporation of

LIFE X BEHAVIOR INC			
(Name of Corporation as currently filed with the F P21000103911	lorida I	Dept. of State)	
(Dосишен	it Numbe	er of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Floridan amendment(s) to its Articles of Incorporation:	a Statute	s, this Florida Not For Profit Corporation adopts	the following
A. If amending name, enter the new name of the co	<u>orporati</u>	ion:	
Ν/Λ .			
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	corporat	ion" or "incorporated" or the abbreviation "Corp	The new v." or "Inc."
B. Enter new principal office address, if applicable	t:	2055 WOOD ST SUITE 104	
(Principal office address MUST BE A STREET ADDRES.		SARASOTA, FL 34237	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2055 WOOD ST SUITE 104	
		SARASOTA, FL 34237	
			<u> </u>
D. If amending the registered agent and/or register new registered agent and/or the new registered	red offic	e address in Florida, enter the name of the	122 AUS
V			- <u>-</u>
Name of New Registered Agent:	 -		<u> </u>
		(Florida street address)	
. New Registered Office Address:		(i in ad street daness)	 ယု
<u>N/.</u>	'Λ ———	, Florida	,1
		(City) (Zip Code)	
New Registered Agent's Signature, if changing Reginereby accept the appointment as registered agent.	istered 2 Lam fam	Agent: iliar with and accept the obligations of the position	9.
	Sig.	nature 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:

(Anach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

President: V = Vice President: T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = ChiefExecutive 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Remove X Add		ce Jones ly Smith	
Lype of Action Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>VP</u>	STEPHANIE STEVENS	3633 CRIMSON CLOVER DR MOUNT DORA, FL 32757
Remove			
2) Change Add			
Remove Change Add Remove			
d) Change Add			<u> </u>
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. <u>If amending or ac</u> (attach additional s		Articles, enter change(s) here: y). (Be specific)	
N/A			

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		·· ····				
						
						
						
						
The date of each amendment(s) at date this document was signed	loption:					if other than the
date this document was signed.						
ting of the top of						• 15
Effective date <u>if applicable</u> :						
	tno more than 9	90 days after ai	mendment file	date)		
<u>Note:</u> If the date inserted in this blo document's effective date on the De	ck does not meet the a	applicable statu	itory filing req	mirements, this	date will not l	be listed as the
sale and a cheenive date on the De	parunent of State's rec	cords.				
Adoption of Amendment(s)	ACTIONIC ASSE	123				
· Account on tentential cittes)	(<u>CHECK ON</u>	<u>15</u>)				

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated 07/25/22
Signature
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
ROBERTO FALCON
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)