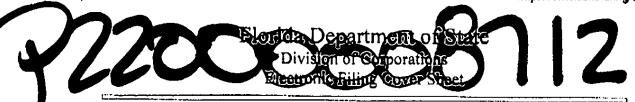
Division of Corporations

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(((H22000082612 3)))



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Division of Corporations

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Account Number : 120140000093 Phone : (941)953-5300 : (941)953-5355

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN GLOBAL HEATH STEPS INSTITUTE INC.

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1

		COVER LETTER	<b>F</b>	H22000082612 3
TO: Amendment S Division of Co			• .	
NAME OF CORP	ORATION: Global Heath Step	s Instituto Inc.		
	MBER: P22000008712			
	es of Amendment and fee are su	ibmitted for filing.	-	
Please return all con	respondence concerning this me	atter to the following:		
	Jerome S. Levin			
	· · · · · · · · · · · · · · · · · · ·	Name of Contact Perso	n	
	Levin Law LC		•	
		Firm/ Company		
	1444 1st Street, Sulto A			
		Address	· · · · · · · · · · · · · · · · · ·	
	Sarasota Fl 34236			
		City/ State and Zip Cod	8	
	linda@levinmediation.com			
	E-mail address: (to be us	ed for future annual report	notification)	
For further informat	ion concerning this matter, pleas	se call:		
Jerome S. Levin		nt (	953 5300	
Nam	of Contact Person	Area Co	de & Daytime Telephone Number	<del></del>
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A) DI P,	ailing Address nendment Section vision of Corporations D. Box 6327 Illahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ssec, FL 32303	

## Articles of Amendment to Articles of Incorporation

H22000082612 3

	of	
Global Heath Steps Institute Inc.	_	
	tion as currently filed with the Florida Dept. of State)	
P22000008712		_
(Docu	ument Number of Corporation (If known)	
Pursuant to the provisions of section 607.1006, Florid Its Articles of Incorporation:	da Statutes, this Florida Profit Corporation adopts the following	; amendment(s) (
A. If amonding name, enter the new name of the	Corporations	
Healthy Steps Global Institute Inc.	··	
name must be distinguishable and contain the word "d "Inc.," or Ca.," or the designation "Corp," "Inc, "chartered," "professional association," or the abbr	corporation." "company." or "incorporated" or the abbreviation, or "Co". A professional corporation name must contain reviation "P.A."	The new n''Corp.,'' the word
B. Enter new principal office address, if applicable	lo:	
(Principal office address <u>MUST BE A STREET AD</u>	DDRESS)	200
	7-C	) r->
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BE	AU.	<u>+</u>
(MATREA POST DEFFICE BY		<del></del>
		<u> </u>
		<u></u>
D. If amending the registered agent and/or registered new registered agent and/or the new registered	ered office address in Florida, enter the name of the	<del></del>
Name of New Registered Agent		
<del></del>	(Florida street address)	
New Registered Office Address:	, Florida	
	(City) (Zip Ce	ud#)
New Registered Agent's Signature, if changing Rej I hereby accept the appointment as registered agent.	glatered Agents I am familiar with and accept the obligations of the position.	
Sign	nature of New Registered Agent, if changing	
Check if applicable		
The amendment(s) is/are being filed pursuant to s.	. 607.0120 (11) (a), F.S.	

## H22000082612 3

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 afficer/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.

Example:

X Change	<u>PT</u>	John Dos		. ~
X Remove	¥	Mike Jones		2022 HAR , 50 15 1
_X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	Address	1
1) Change				
Add				
Remove			<del></del>	
2) Change	***			
Add				<del>-</del>
Remove Change				
Add				
Remove				
4) Change			<u> </u>	
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		· · · · · · · · · · · · · · · · · · ·		
Add				
Remove				

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	H22000082612
	70.07
	1
If an amendment provides for an exchange, reclassification, or cancellation of leaved shares, provisions for implementing the amendment if not contained in the amendment itself:	77 P
(if not applicable, Indicate N/A)	9: 5

		H22000082812 3
The date of each amendment(a) date this document was signed.	adoption:	if other than the
Effective date <u>if applicable</u> :		
	(na mare than 90 days after amendment )	file date)
Note: If the date inserted in this document's effective date on the l	block does not meet the applicable statutory filing requestrement of State's records.	ulrements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK DNE)	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors withou	t shareholder action and shareholder
The amendment(s) was/were a by the shareholders was/were	iopted by the shareholders. The number of votes cast for sufficient for approval.	r the amendment(s)
musi be separately provided fo	proved by the shareholders through voting groups. The reach voting group entitled to vote separately on the am	nendment(s):
	t for the amendment(s) was/were sufficient for approval	
by	(voling group)	н 
Dated	3/3/2022	9: 5 <u>5</u>
nelect	director, president or other officer – if directors or officered, by an incorporator – if in the hands of a receiver, trusted fiduciary by that fiduciary)	rs have not been stee, or other court
	Jerome S. Levin	
	(Typed or printed name of person signing) Attorney	
	(Title of person signing)	<del></del>