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SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	N: FIRST NUTRITIO	N CLUB, INC					
DOCUMENT NUMBER:							
The enclosed Articles of Am		bmitted for filing.					
Please return all corresponde	nce concerning this ma	tter to the following:					
	SABRINA SANTUCHO						
	Name of Contact Person						
	SANTUCHO ACCOUTING SOLUTIONS						
	Firm/ Company						
	10 SW SOUTH RIVER DR#1801						
	Address						
	MIAMI, FL 33130						
	City/ State and Zip Code						
	SAE	BRINA@SANTUCHO.CO	М				
— · F		sed for future annual report					
For further information conc	erning this matter, pleas	561	827-6411				
Name of Con	taat Darson	at (de & Daytime Telephone Number				
Enclosed is a check for the fo							
■ \$35 Filing Fee	3\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303				

Articles of Amendment to Articles of Incorporation of



(Name of Corporation as currently filed with the Florida Dept. of State) P22000021156 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I um familiar with and accept the obligations of the position.

Signature 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)

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.

Example: X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	¥	Mike <u>Jo</u>	ncs	
_X Add	<u>sv</u>	Sally Sn		
Type of Action (Check One)	Title		Name	Address
1) Change				
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		-		
Add				
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
PLEASE CORRECT MISSPELLINGS ON NAMES OF PRESIDENT AND VICE PRESIDENT
PRESIDENT - ORIGINALLY FILED AS :LITVAK, VITALITY.
PLEASE CORRECT TO: LITVAK, VITALIY.
VP - ORIGINALLY FILED AS: SABYRZHANO, BORANBAY.
PLEASE CORRECT TO: SABYRZHANOV, BORANBAY.
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
<u> </u>

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The date of each amendment(s) adoption:	, if other than the
04/05/2021	
Effective date if applicable:	
(no more than 90 days after amendmen	nt file date)
Note: If the date inserted in this block does not meet the applicable statutory filing redocument's effective date on the Department of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors with action was not required.	out shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east by the shareholders was/were sufficient for approval.	for the amendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. T must be separately provided for each voting group entitled to vote separately on the	
"The number of votes cast for the amendment(s) was/were sufficient for appro-	val
by	
by	_
04 / 06 / 2022	
Dated	
Signature	
(By a director, president or other officer – if directors or off selected, by an incorporator – if in the hands of a receiver, a appointed fiduciary by that fiduciary)	
VITALIY LITVAK	
(Typed or printed name of person signing	g)
PRESIDENT	

(Title of person signing)