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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: REBELLE LIFE, C	CORP		
	MBER:			
The enclosed A rtic e	les of Amendment and fee are su	bmitted for filing.		
Please return all co	respondence concerning this ma	tter to the following:		
	NICHOLAS A. NARDUCCI			
	Name of Contact Person			
	REBELLE LIFE, CORP			
		Firm/ Company		
	2801 ST JOHNS BLUFF RD	, S. STE 101		
		Address		
	JACKSONVILLE, FLORIDA 33246			
	City/ State and Zip Code			
	NICK@LIVHEALTHYDEN	TALCOM		
		sed for future annual report	notification)	
For further informa	tion concerning this matter, pleas	se call: 904 at (626-6025	
Name of Contact Person			de & Daytime Telephone Number	
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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 Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303	

Articles of Amendment to Articles of Incorporation of

REBELLE LIFE, CORP	

KUMBUM MAKAM	
(Name of Corporation as current)	y filed with the Florida Dept. of State)
P24000011310	
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	The new
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", -? "chartered," "professional association," or the abbreviation "P.A."	company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent	
	
(Florida st	ver address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar to	
Signature of New R	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>	<u>John Doe</u>	
X Remove	<u>V</u>	Mike Jones	
X Add	\underline{SV}	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	0	SCHURING, TODD A	S16 JARDIN URB Garden Hills
Add			GUAYNABO, PR 00969
X Remove			
2) Change		-	
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			:
5) Change		<u> </u>	<u> </u>
Add			
Remove			
δ) Change			
Add			
Remove			

Attach additional sheets, if necessary)). (Be specific)	
		
· · · = -		
		
<u>f an amendment provides for an ex</u>	change, reclassification, or cancellation of issued shares.	
provisions for implementing the an (if not applicable, indicate N/A)	nendment if not contained in the amendment itself:	
(i) nor appricante, marcate (NA)		
		
<u> </u>	····	

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The date of each amendment(s)	14 February 2024 adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file da	(le)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requiremed epartment of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were action was not required.	dopted by the incorporators, or board of directors without share	eholder action and shareholder
☐ The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes east for the a sufficient for approval.	amendment(s)
	oproved by the shareholders through voting groups. The follow or each voting group entitled to vote separately on the amenda	
"The number of votes ca	it for the amendment(s) was/were sufficient for approval	
by	··	
	(voting group)	
14 Febru; Dated	ry 20242	
Signature	50002	
(By a select	director, president or other officer – if directors or officers haved, by an incorporator – if in the hands of a receiver, trustee, conted fiduciary by that fiduciary)	
	NICHOLAS A. NARDUCCI	
	(Typed or printed name of person signing)	<u> </u>
	PRESIDENT	- '.
	(Title of person signing)	