

P94000074166

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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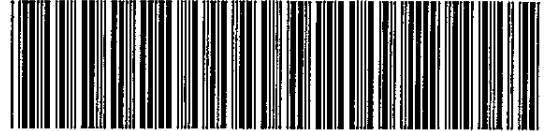
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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**TRANSMITTAL LETTER**

**TO:** Amendment Section.  
Division of Corporations

**SUBJECT:** Bonded Distribution Services, Inc.

**DOCUMENT NUMBER:** P94000074166

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Elizabeth Willers  
(Name of Person)

Wellness Solutions Corp.  
(Name of Firm/ Company)

4798 S. Florida Ave., PMB405  
(Address)

Lakeland, FL 33813  
(City/ State/ and Zip Code)

For further information concerning this matter, please call:

Elizabeth Willers at (863) 648-4166  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee      ☐ \$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

**Street Address**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

April 19, 2004

ELIZABETH WILLERS  
4798 S. FLORIDA AVE., PMB 405  
LAKELAND, FL 33813

SUBJECT: BONDED DISTRIBUTION SERVICES, INC.  
Ref. Number: P94000074166

We have received your document for BONDED DISTRIBUTION SERVICES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

The conflict is "WELLNESS SOLUTIONS, INC." document number P95000092895.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6027.

Michelle Milligan  
Document Specialist

Letter Number: 004A00025744

Articles of Amendment  
to  
Articles of Incorporation  
of

Bonded Distribution Services, Inc.

(Name of corporation as currently filed with the Florida Dept. of State)

P94000074166

(Document number of corporation (if known))

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

04 MAY -3 PM 1:02

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Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**NEW CORPORATE NAME (if changing):**

~~Wellness Solutions Corp.~~ Wellness Revolutions, Inc.

(must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")

**AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE)** Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

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(Attach additional pages if necessary)

If an amendment provides for 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)

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(continued)

The date of each amendment(s) adoption: \_\_\_\_\_

1/1/04

Effective date if applicable: \_\_\_\_\_

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

**(CHECK ONE)**

- ☐ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval by \_\_\_\_\_."  
(voting group)

- ☒ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signed this 1 day of January, 2004.

Signature

Elizabeth Willers

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Elizabeth Willers

(Typed or printed name of person signing)

President/CEO

(Title of person signing)

**FILING FEE: \$35**