Florida Department of State Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000100578 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : JIM SIERRA & ASSOCIATES

Account Number : 110677000356 Phone

: (305)271-7310

Fax Number

COR AMND/RESTATE/CORRECT OR O/D RESIGN

CYBERAGENT SERVICES, INC.

Certificate of Status	0
Certified Copy	. 0
Page Count	05
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

(((H09000100578 3)))

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: CYBERAGENT SERVICES, INC.					
DOCUMENT NUMBER: P97000059620					
The enclosed Article	The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all con	respondence concerning thi	s matter to the following:			
		ADEO BICKRAM	·		
	(Name C	f Contact Person)			
	CYBER	AGENT SERVICES, INC.			
		m/ Company)			
	2280	NW 129TH TERR.	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		
	1	(Address)			
		KE PINES, FL 33028			
	•	ate and Zip Code)			
For further informati	on concerning this matter,	please call:			
SAHADEO BICKRAM		at (954) 436-0820			
(Name o	f Contact Person)	(Area Code & Daytime	Telephone Number)		
Enclosed is a check t	for the following amount m	ade payable to the Florida Dep	partment of State:		
\$35 Filing Fce	\$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 Add		Street Address			
Amendment S		Amendment Section			
Division of Corporations P.O. Box 6327		•	Division of Corporations		
Tallahassee, I		Clifton Building 2661 Executive Center Ci	rcle		
	· in the Lat	Tallahassee, FL 32301	LOIG		

(((H09000100578 3)))



A	rticles of Amendment	APR 21.
Art	to ticles of Incorporation	SECRETARY OF STATE C
	of	THASSEE, FLORIE
	ENT SERVICES, IN	
(Name of Corporation as cur	rently filed with the Florida	Dept. of State)
	7000059620	
(Document Nu	umber of Corporation (if know	wn)
Pursuant to the provisions of section 607.10 following amendment(s) to its Articles of Income		lorida Profit Corporation adopts t
A. If amending name, enter the new name	of the corporation:	
THE ESSENCE OF HEALING, I	NC	
The new name must be distinguishable "incorporated" or the abbreviation "Corp., "Co". A professional corporation nat association," or the abbreviation "P.A."	" "Inc.," or Co.," or the c	designation "Corp," "Inc," or
3. <u>Enter new principal office address, if ar</u> Principal office address <u>MUST BE A STRE</u>		
		
•		
C. Enter new mailing address, if applicable	<u>e:</u>	·
(Mailing address MAY BE A POST OFF	ICE BOX)	
		·
		· · · · · · · · · · · · · · · · · · ·
 If amending the registered agent and/or new registered agent and/or the new reg 		Florida, enter the name of the
new registered agent and/or the new res	distered office address.	
Name of New Registered Agent:		
		,
New Registered Office Address:	(Florida street ac	ddress)
		, Florida
	(City)	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Page 1 of 3

(((H09000100578 3)))

(((H09000100578 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
VP	NADIRA BICKRAM	2280 NW 129TH TERR PEMBROKE PINES, FL 33028	_ ② Add ☑ □ Remove .
			Add Remove
			Add Remove
(attach d	ding or adding additional Articles, additional sheets, if necessary). (Be	specific)	
		·	
provisi	mendment provides for an exchange ions for implementing the amendment applicable, indicate N/A)	e. reclassification, or cancellation of iss nt if not contained in the amendment i	ued shares. tself:
		Page 2 of 3	

(((H09000100578 3)))

	{{(H09000100578 3))}
The date of each amendment	(a) adoptions <u>APRIL 24, 2008</u>
Effective date <u>if applicable</u> s	APRIL 24, 2008 (no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECKOND)
The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) we sufficient for approval.
	es approved by the shareholders through voting groups. The following statement of the each voting group entitled to vote paparately on the amendment(s):
"The number of votes	sest for the amondment(s) was/wore sufficient for expuroval
by	, p
	(voting group)
action was not required.	re adopted by the brand of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder
ection चन्न ग्रहा स्वयुक्ताच्छे.	a Michigan 63. 1-se scores has and a secularist members who assumes and
Deted APRI	24, 2009
Signature	Sahadra Elekhe
red to	a director, president or other officer – if directors or officers have not been could be an incorporator – if in the hands of a receiver, trustee, or other court pinted fiduciary by that fiduciary)
	MARADED BICKRAM
	(Typed or printed mane of person signing)
	PRESIDENT
	(Title of person signing)

Page 3 of 3

(((H09000100578 3)))