FLORIDA DIVISION OF CORPORATIONS 9:08 AM PUBLIC ACCESS SYSTEM ELECTRONIC FILING COVER SHEET

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TO: DIVISION OF CORPORATIONS PAX #: (850)922-4000

ACCT#: Ø7272ØØØØ1Ø1.

FROM: FILINGS, INC. CONTACT: TERESA ROMAN PHONE: (904) 385-6735

FAX #:

(904) 385-6761

NAME: THE SOUTHEAST INSTITUTE FOR WELLNESS, P.A. AUDIT NUMBER...... H97000012544 DOC TYPE........BASIC AMENDMENT CERT. OF STATUS..0 PAGES.....1 CERT. COPIES.....1 DEL.METHOD.. FAX EST.CHARGE.. \$87.50 NOTE: PLEASE PRINT THIS PAGE AND USE IT AS A COVER SHEET. TYPE THE FAX AUDIT NUMBER ON THE TOP AND BOTTOM OF ALL PAGES OF THE DOCUMENT

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ARTICLES OF AMERICANT TO THE ARTICLES OF INCORPORATION OF THE SOUTHEAST INSTITUTE FOR WELLNESS, P.A.

Pursuant to the provisions of the Florida Business Corporation Act. Chapter 507.1006, the undersigned corporation adopts the following articles of amendment to its Articles of Incorporation.

FIRST: The name of the corporation is: THE SOUTHERST INSTITUTE FOR WELLNESS, P.A.

SECOND: The following amendment to the articles of incorporation was adopted by the corporation:

## ARTICLE ONE:

The name of this comporation is: THE FOUNDATION FOR WELLNESS, P.A.

THIRD: The amendment was adopted by the Incorporator on the 29th day of July, 1997. Shareholder action was not required.

Dated: July 297h, 1997

THE SOUTHEAST INSTITUTE FOR WELLNESS, P.A.

For Mikal Busice MICHAEL BERDELL, Incorporator

STATE OF FLORIDA COUNTY OF DADE

Before me, the undersigned authority, personally appeared STARR MICHAEL BERDELL, to me well known to be the person who executed the foregoing articles of amendment to articles of incorporation and acknowledged before me, according to law that they made and subscribed the same for the purposes therein mentioned and set forth and who did take an oath.

N WITNESS WHEREOF, I have hereunto set my hand and seal this day of July, 1997.

NAME:

My Commission Expires: Stuart A. Lipson, Esq. Fla. Bar No. 885770 13899 Biscayna Blvd. #404 Miami, FL 33181 (305) 947-3000

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Notary

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TO: DIVISION OF CORPORATIONS

FAX 0: (850)922-4000

FROM: FILINGS, INC. CONTACT: TERESA ROMAN PHONE: (904)385-6735 (904)385-6761

072720000101 FAX #:

NAME: THE SOUTHEAST INSTITUTE FOR WELLNESS, P.A. AUDIT

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