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2022 JUL 21 ANTI-14

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: Lemus Natural Me	dicine, Inc 				
	MBER:					
The enclosed Artici	les of Amendment and fee are su	bmitted for filing.				
Please return all co	rrespondence concerning this ma	tter to the following:				
	J. Michael Lemus					
		Name of Contact Persor	n			
	Lemus Natural Medicine, Inc	•				
		Firm/ Company				
	11401 SW 40 St					
		Address				
	Miami, Fla 33165					
		City/ State and Zip Cod	e			
	jmlemus@lemushealth.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further informa	tion concerning this matter, pleas		223-7393			
Nan	ne of Contact Person	at (305) 223-7393 Area Code & 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)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Ā	Tailing Address Imendment Section Division of Corporations	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				

Articles of Amendment to Articles of Incorporation of

Articles of Incorporati of
Lemus Natural Medicine, Inc

(Name of Corporation as curren	tly filed with the Florida Dept. of S	tate) 🖟 🛒
P98000012641		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts t	he 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," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name r	abbreviation "Corp.," nust contain the word
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
		
	<u> </u>	<u></u>
D. If amending the registered agent and/or registered office add		<u>the</u>
new registered agent and/or the new registered office address	<u>ss.</u>	
Name of New Registered Agent		.
	 :.	
(Florida s	treet address)	
New Registered Office Address:	<i>(City)</i> , Flor	ida (Zip Code)
	(C II,)	(My Code)
New Registered Agent's Signature, if changing Registered Agen		
I hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of th	e posmon.
	·	
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)

Example:

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 Doc 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	<u>John Do</u>	<u>ne</u>	
X Remove	\underline{V}	Mike Jo	<u>nes</u>	
X Add	<u>SV</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	VP		Gutierrez, Marcia	11401 SW 40 St Suite 120
X Add				Miami, Fl 33165
Remove				
2) Change				
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				·
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

(Attach	additional she	ng additional . Pets, if necessar	n). (Be si	pecific)	., 1101 c .			
	·	•						
N/A								
					<u> </u>			
				-			_	
								
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'. <u>II an ai</u> provis	<u>nenament pr</u> ions for impl	ovides for an e ementing the	<u>exchange, r</u> amendmen	t if not cont	on, or cance sined in the	<u>Häjjon of iss</u> amendment	ued snares, itself	
$\frac{\mathbf{p} \mathbf{r} \mathbf{o} \mathbf{v} \mathbf{n}}{(i)}$	not applicabl	le, indicate N/A)	· · · · · · · · · · · · · · · · · · ·			1102111	
•								
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N/A								
						<u> </u>	·	
						<u> </u>		

The date of each amendment		, if other than the
date this document was signed	6-1/22	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, this date no Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/wer action was not required.	e adopted by the incorporators, or board of directors without shareholder action	n and shareholder
☐ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.	•
must be separately provide	e approved by the shareholders through voting groups. The following statemend for each voting group entitled to vote separately on the amendment(s): cast for the amendment(s) was/were sufficient for approval	
	(voting group)	21
se	y adirector, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	2022 JUL 21 AITH: 14
	Joseph Michael Lemus	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	· · · · · · · · · · · · · · · · · · ·