

Appendix A  
Notarized Copies of Change of Name Documents

**Goodmans**<sup>LLP</sup>

Barristers & Solicitors

250 Yonge Street, Suite 2400  
Toronto, Ontario Canada M5B 2M6

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goodmans.ca

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latkinson@goodmans.ca

December 21, 2007  
Our File No.: 07-3099

**By Overnight Courier**

Mr. Richard Mucha  
Manager, Licencing Services  
Municipal Licensing and Standards  
City of Toronto  
East York Civic Centre  
3rd Floor  
850 Coxwell Avenue  
Toronto, Ontario  
M4C 5R1

Dear Mr. Mucha:

**Re: Natural Health Practitioners of Canada Association**

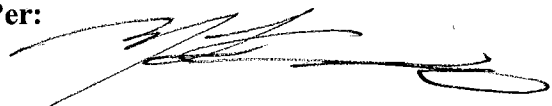
We act as Agents in Ontario for Preetpal Bhamra of Field LLP, Solicitors for Natural Health Practitioners of Canada Association (the "Association").

At the request of Ms. Bhamra, enclosed please find Notarial Copies of the documents prepared, filed and/or requisitioned by us in connection with the change of name of the Association in September, 2007.

Trusting the above is satisfactory for your purposes.

Yours truly,  
GOODMANS LLP

Per:



M. Lynn Atkinson  
Law Clerk

enc.

cc: Preetpal Bhamra (via E-mail)

GOODMANS\5532978.1

CANADA

PROVINCE OF ONTARIO

To Wit:

) TO ALL WHOM THESE PRESENTS  
)  
) MAY COME, BE SEEN OR KNOWN  
)  
)

I, **PATRICIA ANNE ROBINSON**, a Notary Public, in and for the Province of Ontario, by  
Royal Authority duly appointed, residing at the City of Toronto in said Province,

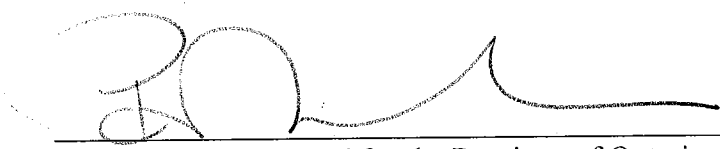
**DO CERTIFY AND ATTEST** that the paper writing hereto annexed are true copies of  
documents produced and shown to me and purporting to be:

1. Form 2 – Notice of Change filed with the Ministry of Consumer and Business Services on the 27<sup>th</sup> day of September, 2007 reporting the change of name of Association of Massage Therapists and Wholistic Practitioners (AMTWP) to NATURAL HEALTH PRACTITIONERS OF CANADA ASSOCIATION (NHPCA) / ASSOCIATION DES PRACTICIENS DE LA SANTE NATURELLE DU CANADA; and
2. Corporation Profile Report issued and certified by the Ministry of Consumer and Business Services on the 19<sup>th</sup> day of December, 2007 confirming the change of name of Association of Massage Therapists and Wholistic Practitioners (AMTWP) to NATURAL HEALTH PRACTITIONERS OF CANADA ASSOCIATION (NHPCA) / ASSOCIATION DES PRACTICIENS DE LA SANTE NATURELLE DU CANADA as accepted and entered on the records of the Ministry of Consumer and Business Services,

the said copies having been compared by me with the said original documents, an act whereof being requested I have granted under my Notarial Form and Seal of Office to serve and avail as occasion shall or may require.

**IN TESTIMONY WHEREOF** I have hereto subscribed my name and affixed my Notarial Seal of Office at Toronto, Ontario this 21<sup>st</sup> day of December, 2007.



  
A Notary Public in and for the Province of Ontario.



Ministry of  
Consumer and  
Business Services

Ministère des Services  
aux consommateurs  
et aux entreprises

Companies and Personal  
Property Security Branch  
393 University Ave, Suite 200  
Toronto ON M5G 2M2

Direction des  
sociétés et des sûretés mobilières  
393, av. University, bureau 200  
Toronto ON M5G 2M2

Page 1/Page 1

FORM 2- EXTRA PROVINCIAL CORPORATIONS/

FORMULE 2 - PERSONNES MORALES EXTRA-PROVINCIALES

Please type or print all information in block capital letters using black ink.

Prêt de dactylographier les renseignements ou de les écrire en caractères  
d'imprimerie à l'encre noire.

INITIAL RETURN/NOTICE OF CHANGE /

Corporations Information Act

RAPPORT INITIAL/AVIS DE MODIFICATION

Loi sur les renseignements exigés des personnes morales

For Ministry Use Only À l'usage du ministère seulement	2. Ontario Corporation Number Numéro matricule de la personne morale en Ontario  1595803	3. Date of Incorporation or Amalgamation Date de constitution, ou fusion Year/Année Month/Mois Day/Jour 1988 09 30	1. Business Corporations/ Société par actions Not-For-Profit Corporation/ Personne morale sans but lucratif Initial Rapport initial Notice of Change Avis de modification  <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>
4. Corporation Name Including Punctuation/Raison sociale de la personne morale, y compris la ponctuation NATURAL HEALTH PRACTITIONERS OF CANADA ASSOCIATION (NHPCA) / ASSOCIATION DES PRACTICIENS DE LA SANTE NATURELLE DU CANADA (APSNCA)			For Ministry Use Only À l'usage du ministère seulement
5. Address of Registered or Head Office/Adresse du siège social c/o / als  Street No./N° civique Street Name/Nom de la rue Suite/Bureau 10339 124th STREET 600 Street Name (cont'd)/Nom de la rue (suite)  City/Town/Ville Province, State/Province, État EDMONTON ALBERTA Country/Pays Postal Code/Code postal CANADA T5N 3W1			For Ministry Use Only À l'usage du ministère seulement
6. Address of Principal Office in Ontario/Adresse du bureau principal en Ontario Street No./N° civique <input type="checkbox"/> Same as Above/ 250 Même que celle ci-dessus <input type="checkbox"/> Not Applicable/ Street Name/Nom de la rue Suite/Bureau Ne s'applique pas YONGE STREET 2400 Street Name (cont'd)/Nom de la rue (suite)  City/Town/Ville ONTARIO, CANADA TORONTO Postal Code/Code postal M5B 2M6			
7. Language of Preference English/Anglais French/Français Langue préférée <input checked="" type="checkbox"/> <input type="checkbox"/>			
8. Former Corporation Name if applicable/Raison sociale antérieure de la personne morale, le cas échéant. ASSOCIATION OF MASSAGE THERAPISTS AND WHOLISTIC PRACTITIONERS (AMTWP)  <input type="checkbox"/> Not Applicable Ne s'applique pas			
9. Date commenced business activity in Ontario/ Date de début des activités en Ontario Year/Année Month/Mois Day/Jour 1988 09 30		10. Date ceased carrying on business activity in Ontario/ Date de cessation des activités en Ontario Year/Année Month/Mois Day/Jour  <input type="checkbox"/> Not Applicable/ Ne s'applique pas <input checked="" type="checkbox"/>	
11. Jurisdiction of Incorporation/Amalgamation or Continuation. (Check appropriate box) Do not check more than one box. Ressort de constitution/de fusion ou prorogation (cocher la case pertinente). Ne cocher qu'une seule case. 1. <input checked="" type="checkbox"/> ALBERTA 2. <input type="checkbox"/> CANADA 3. <input type="checkbox"/> NEW BRUNSWICK 4. <input type="checkbox"/> NOVA SCOTIA 5. <input type="checkbox"/> QUEBEC 6. <input type="checkbox"/> YUKON 7. <input type="checkbox"/> BRITISH ALBERTA CANADA NOUVEAU-ÉCOSSE NOUVELLE-ÉCOSSE QUÉBEC YUKON COLUMBIA 8. <input type="checkbox"/> MANITOBA 9. <input type="checkbox"/> NEWFOUNDLAND 10. <input type="checkbox"/> PRINCE EDWARD 11. <input type="checkbox"/> SASKATCHEWAN 12. <input type="checkbox"/> NORTHWEST 13. <input type="checkbox"/> NUNAVUT MANITOBA TERRE-NEUVE ÎLE-DU-PRINCE-ÉDOUARD SASKATCHEWAN TERRITOIRES DU NUNAVUT NORD-OUEST If other please specify / Si autre, veuillez préciser			

This information is being collected under the authority of The Corporations Information Act for the purpose of maintaining a public data base of corporate information. /  
La Loi sur les renseignements exigés des personnes morales autorise la collecte de ces renseignements pour constituer une banque de données accessible au public.

FOR MINISTRY USE ONLY/À L'USAGE DU MINISTÈRE

☐ See deficiency letter enclosed/Voir l'avis d'insuffisance ci-joint

Please type or print all information in block capital letters using black ink.

Prrière de dactylographier les renseignements ou de les écrire en caractères d'imprimerie à l'encre noire.

FOR MINISTRY USE ONLY À L'USAGE DU MINISTÈRE SEULEMENT	Ontario Corporation Number/ Numéro matricule de la personne morale en Ontario  1595803	Date of Incorporation or Amalgamation Date de constitution ou fusion Year/Année Month/Mois Day/Jour 1988 09 30	For Ministry Use Only À l'usage du ministère seulement
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12. Name and Office Address of the Chief Officer/Manager in Ontario/  
Nom et adresse du bureau du directeur général/gérant en Ontario

☒ Not Applicable/Ne s'applique pas

Last Name/Nom de famille	First Name/Prénom	Middle Name/Autres prénoms
Street Number/Numéro civique		
Street Name/Nom de la rue		
Street Name (cont'd)/Nom de la rue (suite)		
City/Town/Ville	Suite/Bureau	
	Postal Code/Code postal	
ONTARIO, CANADA		
Date Effective Date d'entrée en vigueur	Year/Année Month/Mois Day/Jour	Date Ceased Date de cessation des fonctions

13. Name and Office Address of Agent for Service in Ontario - Check One box

Nom et adresse du bureau du mandataire aux fins de signification en Ontario. Cocher la case pertinente.

☒ Not Applicable/Ne s'applique pas

Only applies to foreign business corporations  
S'applique seulement aux personnes morales étrangères

- a) ☐ Individual or un particulier ou b) ☐ Corporation une personne morale  
Complete appropriate sections below/Remplir les parties pertinentes ci-dessous.

a) Individual Name/Nom du particulier

Last Name/Nom de famille	First Name/Prénom	Middle Name/Autres prénoms

b) Ontario Corporation Number/Numéro matricule de la personne morale en Ontario

Corporation Name including punctuation/Raison sociale, y compris la ponctuation

c) Address/Adresse

c/o / a/s

Street No./N° civique Street Name/Nom de la rue Suite/Bureau

Street Name (cont'd)/Nom de la rue (suite)

City/Town/Ville

Postal Code/Code postal

ONTARIO, CANADA

14. (Print or type name in full of the person authorizing filing./ Dactylographier ou inscrire le prénom et le nom en caractères d'imprimerie de la personne qui autorise l'enregistrement.

I/ Je COLLEEN MacDOUGALL

certify that the information set out herein, is true and correct.  
atteste que les renseignements précités sont véridiques et exacts.

Check appropriate box /  
Cocher la case pertinente

D) ☐ Director/Administrateur

O) ☒ Officer/Dirigeant

P) ☐ Other individual having knowledge of the affairs of the Corporation/Autre personne ayant connaissance des activités de la personne morale

NOTE/REMARQUE: Section 13 and 14 of the Corporations Information Act provide penalties for making false or misleading statements, or omissions.  
Les articles 13 et 14 de la Loi sur les renseignements exigés des personnes morales prévoient des peines en cas de déclaration fausse ou trompeuse, ou d'omission.

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FOR MINISTRY USE ONLY/À L'USAGE DU MINISTÈRE


☐ See deficiency letter enclosed/Voir l'avis d'insuffisance ci-joint

Request ID: 009856693  
Transaction ID: 34200954  
Category ID: (C)CC/E

Province of Ontario  
Ministry of Consumer and Business Services  
Companies and Personal Property Security Branch

Date Report Produced: 2007/12/19  
Time Report Produced: 15:43:40  
Page: 1

Certified a true copy of the data as recorded on the Ontario Business  
Information System at Companies and Personal Property Security Branch.

Director:   
Companies and Personal Property Security Branch  
Ministry of Consumer and Business Services  
Toronto, Ontario

## CORPORATION PROFILE REPORT

Ontario Corp Number	Corporation Name	Incorporation Date
1595803	NATURAL HEALTH PRACTITIONERS OF CANADA ASSOCIATION (NHPCA)/ASSOCIATION DES PRACTICIENS DE LA SANTE NATURELLE DU CANADA (APSNC)	1988/09/30
		Jurisdiction
		ALBERTA
Corporation Type	Corporation Status	Former Jurisdiction
EP DOMESTIC NON-SHARE	REFER TO JURISDICTION	NOT APPLICABLE
Registered or Head Office Address	Date Amalgamated	Amalgamation Ind.
	NOT APPLICABLE	NOT APPLICABLE
10339 124TH STREET	New Amal. Number	Notice Date
Suite # 600	NOT APPLICABLE	NOT APPLICABLE
EDMONTON		Letter Date
ALBERTA		NOT APPLICABLE
CANADA T5N 3W1		
Principal Place of Business in Ontario	Revival Date	Continuation Date
	NOT APPLICABLE	NOT APPLICABLE
250 YONGE STREET	Transferred Out Date	Cancel/Inactive Date
Suite # 2400	NOT APPLICABLE	NOT APPLICABLE
TORONTO	EP Licence Eff.Date	EP Licence Term.Date
ONTARIO	NOT APPLICABLE	NOT APPLICABLE
CANADA M5B 2M6	Date Commenced in Ontario	Date Ceased in Ontario
	1988/09/30	NOT APPLICABLE
Activity Classification		
NOT AVAILABLE		

Request ID: 009856693  
Transaction ID: 34200954  
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Province of Ontario  
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Director

Companies and Personal Property Security Branch  
Ministry of Consumer and Business Services  
Toronto, Ontario

## CORPORATION PROFILE REPORT

Ontario Corp Number

Corporation Name

1595803

NATURAL HEALTH PRACTITIONERS OF CANADA  
ASSOCIATION (NHPCA)/ASSOCIATION DES  
PRACTICIENS DE LA SANTE NATURELLE DU  
CANADA (APSNC)

Corporate Name History

REFER TO JURISDICTION

Current Business Name(s) Exist:

NO

Expired Business Name(s) Exist:

NO

Last Document Recorded

Act/Code Description

Form

Date

CIA CHANGE NOTICE

2

2007/09/28

THIS REPORT SETS OUT THE MOST RECENT INFORMATION FILED BY THE CORPORATION ON OR AFTER JUNE 27, 1992, AND RECORDED IN THE ONTARIO BUSINESS INFORMATION SYSTEM AS AT THE DATE AND TIME OF PRINTING. ALL PERSONS WHO ARE RECORDED AS CURRENT DIRECTORS OR OFFICERS ARE INCLUDED IN THE LIST OF ADMINISTRATORS.

ADDITIONAL HISTORICAL INFORMATION MAY EXIST ON THE COMPANIES AND PERSONAL PROPERTY SECURITY BRANCH MICROFICHE.

The issuance of this certified report in electronic form is authorized by the Director of Companies and Personal Property Security Branch.