

K07073

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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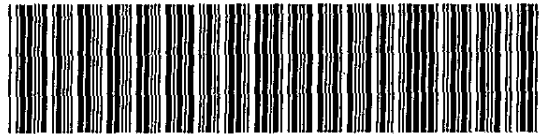
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ISICOFF, RAGATZ & KOENIGSBERG, P.A.

ATTORNEYS AT LAW

1101 BRICKELL AVENUE
SUITE 800 SOUTH TOWER
MIAMI, FLORIDA 33131
TEL: 305.373.3232
FAX: 305.373.3233

e-mail: isicoff@irlaw.com

November 19, 2004

Amendment Section
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

VIA FEDEX

RE: Optimum Nutrition, Inc.

Dear Sir or Madame:

Enclosed please find the following items for filing with the Department of State:

1. Optimum's Statement of Change of Registered Office or Registered Agent or Both for Corporations.
2. A check in the amount of \$35.00 payable to the Florida Department of State.

Please feel free to contact this office if you have any questions or comments regarding the above.

Sincerely,

ISICOFF, RAGATZ & KOENIGSBERG, P.A.



Eric D. Isicoff
For the Firm

EDI/sp

Enclosures

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Optimum Nutrition, Inc.

(Name of corporation)

DOCUMENT NUMBER: K07073

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

Eric D. Isicoff, Esq.

(Name of contact person)

Isicoff, Ragatz & Koenigsberg, P.A.

(Firm/Company)

1101 Brickell Avenue, Suite 800 South Tower

(Address)

Miami, Florida 33131

(City/state and zip code)

For further information concerning this matter, please call:

Eric D. Isicoff

(Name of contact person)

at (305) 373-3232

(Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

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

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Optimum Nutrition, Inc.
2. The principal office address: 600 North Commerce Street, Aurora, Illinois 60504
3. The mailing address (if different): 403 Sawgrass Corporate Parkway, Sunrise, Florida 33343
4. Date of incorporation/qualification: 12/14/1987 Document number: K07073
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Michael J. Costello
8611 NW 60th Ct
Parkland, Florida 33067

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Eric D. Isicoff, Esq.
1101 Brickell Avenue, Suite 800 South Tower
(P.O. Box NOT acceptable)
Miami, Florida 33131

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]
(Signature of an officer or director)

Michael J. Costello President
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]
(Signature of Registered Agent)

11-16-04
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314