L080000009216

(Requestor's Name)									
(Address)									
(Address)									
(City/State/Zip/Phone #)									
PICK-UP WAIT MAIL									
(Business Entity Name)									
(Dusiness Entity Name)									
(Document Number)									
Certified Copies Certificates of Status									
Special Instructions to Filing Officer:									
MAR 2 8 2014									
A. LUNT									

Office Use Only

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ZOHMAR 21 PH 2 SA



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper acasper5@cscinfo.com

Date: March 19, 2014

Order#: 049715-010

Re: PILATES ON THE BEACH, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ami Casper

c/o Corporation Service Company 2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Na	me of the limited liability company: PILATES	ON TH	E BEAC	H, LLC		·		
2	(a)	712 W. 51st Street		(b) 712 W. 51st Street					
	\ <i>\</i> -/	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(5)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
		Miami Beach FL 33140		_	Miami Bea	ch, FL 33140			
		01/25/2008			L08000009	216			
3.		Date of filing/registration in Florida		4.	E	Ocument number			·
5.	(a)	Assouline & Berlowe, P.A.							
٦.	(a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State					· •		
		3250 Mary Street						70/	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)							2014 HAR	7
		Suite 308					ASS	R 21	
		Miami	, FL_	33133			EE, F	7	FT
	(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Re 1201 Hays Street NEW Registered Office Address:	egistered (Office add	ress:			ණ න	
		Tallahassee	,FL	32301					
th ag w	e cha tent v as/we e arti	imited liability company is not organized under inge or changes are made, the Florida street add vill be identical. Or, in the case of a Florida line authorized by an affirmative vote of the me cles of organization or the operating agreemen	dress of t mited lia mbers of	the regist bility con the limi imited li	tered office of the second term	and the business of hereby confirmed company or as oth pany:	ffice of the that the c	he regis :hange(stered s)
		and Tough Melmber ture of a member or authorized representative of a member		Sha		er, Member Printed or typed name	of cionee		 -
I pi	here ovisi e obi mer	by accept the appointment as registered agent ions of all statutes relative to the proper and colligations of my position as registered agent as left reflect a change in the registered office add in writing of this change.		ee to act performa I for in C ereby co	in this capa ince of my d hapter 605, infirm that th	city. I further agre uties, and I am fan F.S. Or, if this do he limited liability		iply with h and a s being has be	h the sccept filed sen
Ŝ	ignati	or Of Registered Agent Corporation Service Con	npany	BY:	Sylvi Quepp	.a et, Assistant Vic	e Presid	ent	

Division of Corporations P.O. Box 6327 o Tallahassee, FL 32314 FILING FEE: \$25.00