L12000096496

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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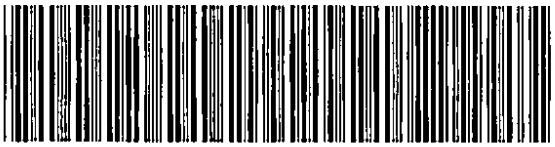

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. WARREN
DEC 01 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

Name of Limited Liability Company

THE YOGA ROOM of St. Augustine LLC

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

PAMELA OGNJENOVIC
Name of Person

MYNT MOVEMENT
Firm/Company

7085 AIA South
Address

St. Augustine, FL 32080
City/State and Zip Code

ognj66623@bellsouth.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PAMELA OGNJENOVIC at 904 461-6623
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ $25.00 Filing Fee ☐ $30.00 Filing Fee & Certificate of Status ☐ $55.00 Filing Fee & Certified Copy ☐ $60.00 Filing Fee, Certificate of Status & Certified Copy

Additional copy required

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Name of the Limited Liability Company as it now appears on our records.
(A Florida Limited Liability Company)

THE YOGA Room of St. Augustine LLC

The Articles of Organization for this Limited Liability Company were filed on 7/26/2012 and assigned Florida document number L12000090496

This amendment is submitted to amend the following

A. If amending name, enter the new name of the limited liability company here: Mynt Movement LLC

The new name must be distinguishable and contain the words "Limited Liability Company" or "Limited Company" or the designation "LLC" or "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent

New Registered Office Address

Florida

New Registered Agent's Signature, if changing Registered Agent:

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

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If changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR Manager
AMBR Authorized Member

Title	Name	Address	Type of Action
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: **(optional)**

(If an effective date is stated, it must be specific and cannot be prior to the date of filing or more than 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of (b) The 90th day after the record is filed

Dated 11/27/17

Pamela Ognjenovic

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Filing Fee: $25.00

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