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R. WH!TE

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: General Nutrition Corporation

Name of Corporation

F0200005670

DOCUMENT NUMBER: F03000005670

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:

Meir Weinberg

Name of Contact Person

Virtual Paralegal Services

Firm/Company

651 N. Broad St., Ste 308

Address

Middletown, DE 19709

City/State and Zip Code

meir@virtualparalegalservices.com

E-mail address: (to be used for future annual report notification)

E-man address. (to be used for ruture annual report normality)

For further information concerning this matter, please call:

Meir Weinberg

Name of Contact Person

Name of Contact Person

at (508) 405-1943

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

statement of char	provisions of sections 607,0502, 617.0502, 607.1508, or 617.1508, Florida Status age is submitted for a corporation organized under the laws of the State of Penn to change its registered office or registered agent, or both, in the State of Florid	sylvania	
1. The name of the	ne corporation: General Nutrition Corporation		
2. The principal of	office address: 300 Sixth Ave. , PA 15222		_
3. The mailing ac	ldress (if different):		
4. Date of incorp	oration/qualification: 11/13/2003 Document number: F0300000	5670	
	street address of the current registered agent and registered office on file with thement of State: (If resigned, enter resigned)	e	
	NRAI Services, Inc.	~ >	
	1200 South Pine Island Road		
	Plantation, FL 33324	2019 DFC 16	
6. The name and street address of the new registered agent (if changed) and /or registered offic (if changed): Global Virtual Agent Services, Inc.		5 PH I2: 4.7	J
		7	
	5702 Tanagerlake Rd P.O. Box NOT acceptable		
	Lithia, FL 33547		
The street address changed will l	ss of its registered office and the street address of the business office of its registerical.	istered ager	nt,
Such change was authorized by the	s authorized by resolution duly adopted by its board of directors or by an office board, or the corporation has been notified in writing of the change.	er so	
Swan A	Susan M. Canning, Senior Vice President at Printed or typed name and title	nd Secretary	
I further agree to performance of i agent. Or, if this	the appointment as registered agent and agree to act in this capacity. It is comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as resident is being filed merely to reflect a change in the registered office addute the corporation has been notified in writing of this change.	egistered lress, I	
	ature of Registered Agent 12 10 19		
If signing on bel	nalf of an entity:		
Carrie	Conn Assistant Secretary		

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