L0300021339

(Re	equestor's Name)		_
(Ad	dress)		_
(Ad	dress)		_
(Cit	ty/State/Zip/Phon	e#)	_
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nat	me)	_
(Do	ocument Number)		
Certified Copies	_ Certificates	s of Status	_
Special instructions to	Filing Officer:		

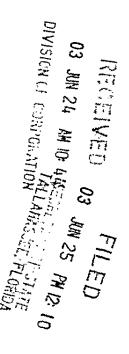
Office Use Only



900018940899

06/24/03--01032--007 **25.00







FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 24, 2003

LAZARUS

TALLAHASSEE, FL

SUBJECT: UNITED WELLNESS INSTITUTE LLC

Ref. Number: L03000021339



We have received your document for UNITED WELLNESS INSTITUTE LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$25.00 payment.

We understand that Roman F. Serra is going to replace Alina Serra as Registered Agent.

But are we also to delete Alina Serra as a MANAGER of the company? Is Alina Serra no longer going to be a manager? Please clarify your amendment.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr Corporate Specialist

Letter Number: 203A00038473

OFFICE USE ONLY(DOCUMENT #)
LAZARUS CORPORATE FILING SERVICE
3320 S.W. 87 AVENUE
MIAMI, FLORIDA (305)552-5973
TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)



Examiner's Initials

		OFFICE USE ONLY
C	CORPORATION NAME(S) & DOCI	IMENT NUMBER (c) (c)).
•	. • l	t a transfer of the second
1.		NESS INSTITUTE LLC
^	(Corporation Name)	(Document #)
2.	Z. (Corporation Name)	(Document #)
3.		
	(Corporation Name)	(Document #)
4.	4. (Corporation Name)	(Document #)
	Walk in Pick up time 1.	OO Certified Copy
	Mail out Will wait	Photocopy Certificate of Status
	NEW FILINGS	AMENDMENTS
	Profit	Amendment
	NonProfit	Resignation of R.A., Officer/Director
	. Limited Liability	Change of Registered Agent
	Domestication	Dissolution/Withdrawal
	Other	Merger
	OTHER FILINGS	REGISTRATION/
	Annual Report	QUALIFICATION
	Fictitious Name	Foreign
	Name Reservation	Limited Partnership
	}	Reinstatement
	<u> </u>	Trademark

Other

CERTIFICATE OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

United WELLNESS Institute ELE
(Present Name) (A Florida Limited Liability Company)
(A Fibrida Billined Billottiny Company)
Residence of the second se
· · · · · · · · · · · · · · · · · · ·
FIRST: The date of filing of the articles of organization was $\frac{6/12/2003}{}$
rite trace of ming of the arricles of organization was the first property of the arricles of organization was the first property of the arricles of organization was the first property of the arricles of organization was the arricles organization was the arricles of organization was the arricles or organization was the arricles or organization was the arrival organization which are the arrival organization with the arrival organization was the arrival organization with the arrival organization was the arrival organization with the arrival organization was the arrival organization which are the arrival organization with the arrival organization was the
SECOND: The following amendment(s) to the articles of organization was/were adopted by the limited
DELETE: ALINA SERRA / HANAGER OF The Company
Secretary - The secretary
\cdot
NEW REGISTERED AGENT:
ROMAN F. SERRA
2740 S.W. 97 AVE. SUITE #112
MIAMI, FL. 33165
Dated 6 - 202003.
Dateu
Signature of a member of authorized representative of a member
ROMAN F. SERRA Typed or printed name of signee
· Typed or printed name of signee

Filing Fee: 25.00

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERD OFFICE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

RECISTERED ACENTISICAL TURES