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CRETARY OF STATE
ON OF CORPORATIONS

J. BRYAN

APR - 8 2008

EXAMINER

COVER LETTER

TO: Registration S Division of Co		_		
•	The Filves	e Claf	LLC	
SUBJECT:		ited Liability Company)		
•	(Name of Lim	ned Liability Company)		
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	Jose	ph D. Mac V (Name of Person) Fitness Chef	KAY	
	,	(Name of Person)		
	The	Fitness Chet	- 660	
		(Firm/Company)		
	5621	Brooklyn.	Aue	æ
		(Address)		08 Vision
	SARAS	OA, FI	34231	号 鸮
		(City/State and Zip Code)	,	1 SH
				SECRETARY OF ORATIONS SECRETARY OF CORPORATIONS OR APR - 7 AM 10: 30
	concerning this matter, please c			Ö. RA
Joseph	D. Mackay	at (841) 356	-4658	30
(Name	of Person)	(Area Code & Dayt	time 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 &	\$60.00 Filing Fee,	
	Certificate of Status	Certified Copy (additional copy is enclose	Certificate of State ed) Certified Copy	atus &
		/m	(additional copy	is enclosed)

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

ARTICLES OF ORGANIZATION OF company as it now appears on our records. The Articles of Organization for this Limited Liability Company were filed on and assigned Florida document number <u>LOSOOOO 2913</u>. This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbavia "L.L.C." 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: 15rook New Registered Office Address: (Enter Florida street address)

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 608, 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.

(If Changing Registered Agent, Signature of New Registered Agent)

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records:</u>

MGR = M MGRM =	anager Managing Member		
<u> Fitle</u>	<u>Name</u>	Address	Type of Action
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	Signati	are of a member or authorized representative of a member	
		Toseph D. Wac Kay Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00