## 105000013085

0	Requestor's Name	e)		
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(City/State/Zip/Phone #)				
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DIVISION OF CORPORATIONS

## TRANSMITTAL LETTER

	gistration Sect vision of Corp			
SUBJECT	NEW AGE	WELLNESS, LLC		
		(Name of Li	mited Liability Company)	
		Amendment and fee(s) are sul		
	w	illiam J. Nielander		
		0	Name of Person)	<del></del>
	William	J. Nielander, P.A.		
		C	Firm/Company)	
	172 E. inter	ake Blvd.		
			(Address)	
	Lake	Placid, FL 33852		· · · · · · · · · · · · · · · · · · ·
		(City/	'State and Zip Code)	
For further	information co	ncerning this matter, please of	call:	
Kir	n Ridgeway		at ( 863 ) 465-	
		(Name of Person)	(Area Code & Day)	time Telephone Number)
Enclosed is a	check for the fo	llowing amount:		
<b>g \$</b> 25.00 Fi	ling Fee	□ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 29, 2005

WILLIAM J. NIELANDER, P.A. 172 E. INTERLAKE BLVD. LAKE PLACID, FL 33852

SUBJECT: NEW AGE WELLNESS, LLC

Ref. Number: L05000013085

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

The registered agent must sign accepting the designation.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

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) 245-6067.

Neysa Culligan Document Specialist

Letter Number: 105A00054384

## . ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

**NEW AGE WELLNESS, LLC** 

	(Present Name) (A Florida Limited Liability Company)	_	
FIRST: SECOND:	The Articles of Organization were filed on February 8, 2005 and assigned document number L05000013085  The following amendment(s) to the Articles of Organization was/were adopted by the liability company:	mited	
ARTICLE II is amo	ended to read as follows for both street address and mailing address: 263 Catfish Creek Road, L	.ake F	łacid, FL
ARTICLE IV is an	ended to read as follows: William J. Nielander, P.A., 172 E. Interlake Blvd. Lake Placid, FL 3385	52 R	
ARTICLE V is am	ended to read as follows: Title: MGR, Gail M. Judah, 263 Catfish Creek Road, Lake Placid, FL	33852	7494
	nall be hereby deleted from the LLC.		
I hereby of comply wi and I am f Chapter of address, I	iccept the appointment as registered agent and agree to act in this capacity. I further agre th the provisions of all statutes relative to the proper and complete performance of my dut amiliar with and accept the obligations of my position as registered agent as provided for 08, F.S. Or, if this document is being filed to merely reflect a change in the registered offic hereby confirm that the limited liability company has been notified in writing of this chang	e to es, in ce e.	
(Signature of	Reductored Agent)	OS SEP	DIVISION
Dated July	20 011111111111111111111111111111111111	5	FILE DF CO
	Gailm Judah July Mulling Signature of a member or authorized representative of a member	PH 2: 03	D OF STATE RPORATIONS
	GOI M. Gudah Typed or printed name of signee Robert MASSAM	ſ	

Filing Fee: \$25.00