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## **COVER LETTER**

**TO:** Registration Section Division of Corporations

## SUBJECT: Work Out International, LLC. (Name of Limited Liability Company)

•Dear Sir or Madam:

. .

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lorraine E. Perez

(Name of Person)

Intercontinental Law Firm, P.A. '

P.O. Box 430458

(Address)

South Miami, FL 33243

(City/State and Zip Code)

For further information concerning this matter, please call:

 Lorraine E. Perez
 at ( 305 ) 740-9630

 (Name of Person)
 (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:** Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Enclosed is a check for the following amount:

✓ \$25 Filing Fee

□ \$55 Filing Fee & Certified Copy

INHS18 (5/08)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Name of the limited	d liability company:	Work Out	International, L	LC.
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- 2. (a) Principal office address of limited liability company: <u>3191 Coral Way, Suite 616</u> (*Note: MUST BE STREET ADDRESS*) Miami, FL 33145
  - (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)

P.O. Box 430458 South Miami, FL 33243

09/29/2005

3. Date of filing/registration in Florida

4. Document number

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5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

Intercontinental Law Firm, P.A.

	Registered Office Address:	5901 SW 74th Street_Suite 200	)		
		South Miami, FL 33143	·	:0	
	۰. ۲۰ ۲		AH E	S	-71
(	b) Enter name of NEW Registered Agent and/or NE	<b>EW Registered Office address</b>	ASA	67 N)	
•	· · · · · · · · · · · · · · · · · · ·		SE X	ö	្រា
	NEW Registered Agent:		<u> </u>		
		• · • · • • • • • • • • • • • • • • • •	Fes	-	0
	NEW Registered Office Address:	3191 Coral Way	- 25	<u> </u>	
	(MUST BE FLORIDA STREET ADDRESS)	Suite 616	_ 5 7		
		<u>Miami</u>	_,FL <u>3</u>	3149	

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited limited liability company.

Tonare 19
Signature of a member or authorized representative of a momber)
orraine E. Perez
Printed or typed name of signee)
I hereby accept the appointment as registered agent and agree to

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complex 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.

Registered Agent) Signature

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

INHS18 (05/08)