

LD7000022850

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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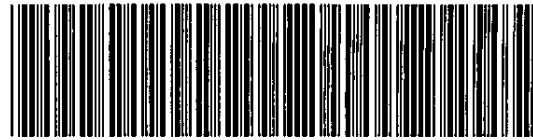
(Business Entity Name)

(Document Number)

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SEP 21 2016

S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

Weightloss Holdings, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Thomas. R. Willett

Name of Person

Weightloss Holdings LLC

Firm/Company

412 E. Madison St, #1100

Address

Tampa, FL 33602

City/State and Zip Code

Krossman@mediaweightlossclinics.com

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

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For further information concerning this matter, please call:

Kate Rossman

Name of Person

at (813)

Area Code

225-1051

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$4375 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(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
TO
ARTICLES OF ORGANIZATION
OF

WEIGHTLOSS Holdings LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on March 01, 2007 and assigned Florida document number L07000022850.

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

412 E. Madison St, #1100
Tampa, FL 33602

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

412 E. Madison St, #1100
Tampa, FL 33602

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:

New Registered Office Address:

412 E. Madison St #1100
Enter Florida street address
Tampa, Florida 33602
City Zip Code

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated _____, _____


Signature of a member or authorized representative of a member

Thomas K. Willett MGRM
Typed or printed name of signee

**Amended
Electronic Articles of Organization
For
Florida Limited Liability Company**

DOCUMENT
#L07000022850

Article I

The name of the Limited Liability Company is:
WEIGHTLOSS HOLDINGS, L.L.C.

Article II

The street address of the principal office of the Limited Liability Company is:
412 E. Madison St., Suite 1100
Tampa, FL 33602

The mailing address of the Limited Liability Company is:
412 E. Madison St
Suite 1100
Tampa, FL 33602

Article III

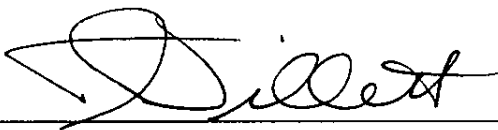
The purpose for which this Limited Liability Company is organized is:
ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:
THOMAS K WILLETT
412 E. Madison St. #1100
Tampa, FL 33602

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 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.

Registered Agent Signature: THOMAS K. WILLETT



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Article V

L07000022850

The name and address of managing members/managers are:

Title: MGRM
THOMAS K. WILLETT
412 E. Madison St. #1100
Tampa, FL 33602

Article VI

The effective date for this Limited Liability Company shall be:

03/01/2007

Signature of member or an authorized representative of a member

Signature: Thomas K. Willett

A handwritten signature in dark ink, appearing to read 'T. Willett', is written over a horizontal line.

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