L07000/0/657

	(Requestor's Name)
1	(Address)
· · ·	(Address)
,	(144,000)
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:
	A. LUNT
	MAY 20 2008
,	EXAMINER

Office Use Only



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SECRETARY OF STATE ALLAHASSEE, FLORIDA

FILED

COVER LETTER

	istration Section sion of Corporation						
SUBJECT:	Mind	Body	and	Baby	L L C		
Sebuber.		(Name of Li	mited Liability	Company)			
The enclosed	Articles of Amendm	ent and fee(s) are su	ubmitted for fil	ing.			
Please return	all correspondence c	oncerning this matte	er to the follow	ring:			
		Tamo	Q rq (Name o	Tait+	_		
	<u></u>		(Firm/C	ompany)			
	5	5205 N	E 3 ^ 0	1 Court	Apt	- <u>J</u> _	
			(Add	ress)			
	,	Miami	FL	3313	7	2008 SEC	
			(City/State a	nd Zip Code)		MAY 19 RETAR) AHASSI	FILED
For further in	formation concerning	g this matter, please	call:			RY (m
Nat	haniel C	allahan		ZAE 975-	- 4760	SECRETARY OF STATES	O
	(Name of Person)	777 777 777	at (<u>-</u>	(Area Code & Da	ytime Telephone	Number 39	
					.+	- حد	
Enclosed is a	check for the follow	ing amount:					
\$25.00 Fil		.00 Filing Fee & ertificate of Status	Certif	Filing Fee & ĭed Copy ional copy is enclo	sed) C	0.00 Filing Fee, Certificate of Sta Certified Copy additional copy	atus &
÷. 6	MAILING ADI Registration Sec Division of Corp P.O. Box 6327 Tallahassee, FL	tion porations		STREET/COU Registration Sec Division of Cor Clifton Building 2661 Executive	ction porations g		

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

•	, याम्य हुन्य			
(Name of the Limited	Liability Company as it now A Florida Limited Liability Com	appears on our records.)		
				•
The Articles of Organization for this Limited L	iability Company were filed o	on October 5,	2007 and assigned	1
Florida document number <u>L 07000</u>	101657			
	·····			
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name of	f the limited liability compa	ny here:		
Mind, Body & Baby,	LLC			
The new name must be distinguishable and end wi "L.L.C." B. If amending the registered agent and/registered agent and/or the new registered of Name of New Registered Agent: New Registered Office Address:	or registered office addres	s on our records, Anter	yne Blvd	e new
	AA'	,	•	
	Miami	, Florida _	3313 (Zip Code)	
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing	Registered Agent:			e4.

(If Charging Registered Agent, <u>Signature of New Registered Agent</u>)

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

MGR = Manager

MGRM	1 = Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Add
			Remove
			Add
			The move
			Add Remove
			TALL.
			CRE NAN Add
			Add Framove
D. If an	nending any other information, ento	er change(s) here: (Attach additional shee	
Dated	February 19	7∞8	
	Comena	member or authorized representative of a men	
	Signature of a	member or authorized representative of a men	nber
	19mara	Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00