

L07000112579

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

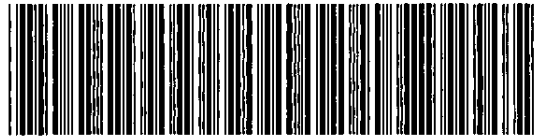
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500121726935

04/02/08--01032--028 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 APR 25 PM 8:23

J. BRYAN APR 23 2008

J. BRYAN

APR 28 2008

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: A New You Weight Loss & Fitness, 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:

Joseph Costa
(Name of Person)

A New You Weight Loss & Fitness, LLC
(Firm/Company)

11742 Metro Parkway, unit A
(Address)

Fort Myers, FL 33966
(City/State and Zip Code)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 APR 25 PM 8:24

For further information concerning this matter, please call:

Joseph Costa at (239) 292-3641
(Name of Person) (Area Code & Daytime 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 & 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 3, 2008

JOSEPH COSTA
A NEW YOU WEIGHT LOSS & FITNESS, LLC
11742 METRO PARKWAY, UNIT A
FORT MYERS, FL 33966

SUBJECT: A NEW YOU WEIGHT LOSS & FITNESS, LLC
Ref. Number: L07000112579

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
08 APR 25 PM 8:24

We have received your document for A NEW YOU WEIGHT LOSS & FITNESS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6043.

Joey Bryan
Regulatory Specialist II

Letter Number: 808A00019756

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

A New You Weight Loss & Fitness, LLC

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

FILED
SECRETARY OF CORPORATIONS
DIVISION
08 APR 25 PM 8:24

The Articles of Organization for this Limited Liability Company were filed on 11/07/2007 and assigned
Florida document number L07000112579.

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 abbreviation "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: _____

New Registered Office Address: _____

(Enter Florida street address)

_____, **Florida** _____
(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 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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Mgrm	Dawn Costa	18486 Geranium Rd Fort Myers, FL 33967	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

1. Article III - To help people live healthier lives through body detoxification and
exercise *(Please change)*

2. Address of business Change to - 11742 Metro Parkway, Fort Myers, FL 33966

Dated March, 27, 2008

Joseph Costa

Signature of a member or authorized representative of a member

Joseph Costa

Typed or printed name of signee

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 APR 25 PM 8:24