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J. SAULSBERRY EXAMINER

NOV 1 9 2010

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DMY-X Fit Body Sculpting, 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:

Onyedikachi IS-eji Name of Person	_	
Firm/Company	ZOIO NOV	
2358 SW 135 AVR	NOV 18	The second secon
Miramorr, F1 33027 City/State and Zip Code	PH 3:	
Oiberi Obellsouthinet E-mail address: (to be used for future annual report notification)	80 S	

For further information concerning this matter, please call:

Onyedikachi Ibeli at (954 793-2746

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ony-x Fit Boby	sculpting,	LLC		
Ony-X Fit Boby (Name of the Limited Liability Compa) (A Florida Limited Liability Compa)	ny as it now appears on our re iability Company)	ecords.)		
The Articles of Organization for this Limited Liability Company Florida document number <u>L0900006933</u>				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
Tight N UP Fity The new name must be distinguishable and end with the words "Limi	iess, LLC			
The new name must be distinguishable and end with the words "Limi"L.L.C."	ted Liability Company," the de	signation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:	4624	HOllywood Blud		
(Principal office address MUST BE A STREET ADDRESS)	Hollywood	HOILYWOOD Blud F1, 33021		
Enter new mailing address, if applicable:	4	2010.1 SEC		
(Mailing address MAY BE A POST OFFICE BOX)		HE TO TO		
B. If amending the registered agent and/or registered of	fice address on our record	ds. enter the name of the new		
registered agent and/or the new registered office address here		3: 08 05: 08		
Name of New Registered Agent:	<u></u>			
New Registered Office Address:				
	Enter Florida street address			
		Florida		
	Citv	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

1f 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

=1

<u>Title</u>	<u>Name</u>	Address		Type of Action
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Dated	November	15, 2010	LGR D &	PH 3: 08
		nature of a member or authorized re		
		On yedika Ch	1 ISEVI	

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Filing Fee: \$25.00