

LIU0000014686

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EXAMINER



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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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11 JUL - 1 AM 9:21  
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CORPDIRECT AGENTS, INC. (formerly CCRS)  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301  
222-1173

**FILING COVER SHEET**  
**ACCT. #FCA-14**

**CONTACT:** KATIE WONSCH

**DATE:** 07/01/2011

**REF. #:** 001495.150716

**CORP. NAME:** STEM CELLUTRITION, LLC

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- |  |   |  |
|--|---|--|
| <input type="checkbox"/> ARTICLES OF INCORPORATION   | <input checked="" type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT               | <input type="checkbox"/> TRADEMARK/SERVICE MARK           | <input type="checkbox"/> FICTITIOUS NAME         |
| <input type="checkbox"/> FOREIGN QUALIFICATION       | <input type="checkbox"/> LIMITED PARTNERSHIP              | <input type="checkbox"/> LIMITED LIABILITY       |
| <input type="checkbox"/> REINSTATEMENT               | <input type="checkbox"/> MERGER                           | <input type="checkbox"/> WITHDRAWAL              |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION |   |  |
| <input type="checkbox"/> OTHER:                      |   |  |

STATE FEES PREPAID WITH CHECK# 540495 FOR \$ 55.00

**AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:**

\_\_\_\_\_ COST LIMIT: \$ \_\_\_\_\_

**PLEASE RETURN:**

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| <input type="checkbox"/> CERTIFICATE OF STATUS     |   |   |

Examiner's Initials

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

STEM CELLUTRITION, LLC

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

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The Articles of Organization for this Limited Liability Company were filed on February 8, 2010 and assigned  
Florida document number L10000014686.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

STEM PEARLS, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

555 Heritage Drive, Suite 130

(Principal office address MUST BE A STREET ADDRESS)

Jupiter, Florida 33458

Enter new mailing address, if applicable:

555 Heritage Drive, Suite 130

(Mailing address MAY BE A POST OFFICE BOX)

Jupiter, Florida 33458

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:

United Corporate Services, Inc.

New Registered Office Address:

9200 South Dadeland Boulevard, Suite 508

Enter Florida street address

Miami

Florida

33156

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

Page 1 of 2 Michael A. Barr, Pres.

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	Stem Cell Assurance, Inc.	200 Glades Road, Suite 2 Boca Raton, Florida 33432	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Stem Cell Assurance, Inc.	555 Heritage Drive, Suite 130 Jupiter, Florida 33458	<input checked="" 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.)*

Dated June 26, 2011

 6/26/11  
Signature of a member or authorized representative of a member

Mark Weinreb  
Typed or printed name of signee