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Division of Corporations

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L10000033215

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
M & O MASSAGE THERAPY SERVICES LLC

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J. BRYAN

AUG -5 2010

EXAMINER

8/5/2010

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

M & O MASSAGE THERAPY SERVICES 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 03/28/2010 and assigned
Florida document number L10000033215

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."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

8045 NW 36 STREET

STE: 528

MIAMI, FL 33166

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8045 NW 36 STREET

STE: 528

MIAMI, FL 33166

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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:

MAYKEL HERNANDEZ

New Registered Office Address:

8045 NW 36 STREET STE: 528

Enter Florida street address

MIAMI

Florida

33166

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.

Maykel Hernandez

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>
MGR	OSMANI RAMIREZ ACOSTA	16419 SW 73 TERRACE MIAMI, FL 33193	<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.)

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Dated AUG. 04, 2010

Signature of a member or authorized representative of a member

OSMANI RAMIREZ ACOSTA

Typed or printed name of signer