

L11000005272

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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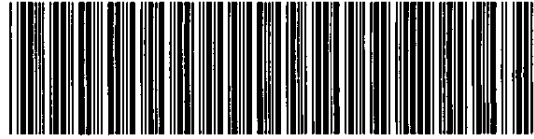
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EXAMINER



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02/27/12--01013--014 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 FEB 27 AM 11:54

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Nutrition Club of Florida, Llc.
(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Alejandro Montemayor
(Contact Person)

N/A
(Firm/Company)

613 S.E. 1st Ave
(Address)

Fort Lauderdale, Fl. 33301
(City/State and Zip Code)

For further information concerning this matter, please call:

Alejandro Montemayor at (561) 441-6700
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

\$25 Filing Fee

\$55 Filing Fee &
Certified Copy

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 FEB 27 AM 11:54

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
12 FEB 27 AMU: 54

Nutrition Club of Florida, 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 01/13/2011 and assigned Florida document number L110000005272

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)

613 S.E. 1st Ave.
Ft. Lauderdale, Fl. 33301

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Same as above.

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:

Alejandro Montemayor.

New Registered Office Address:

613 S.E. 1st Ave.

Enter Florida street address

Ft. Lauderdale, Florida 33301

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.

[Signature]
If Changing Registered Agent, Signature of New Registered Agent

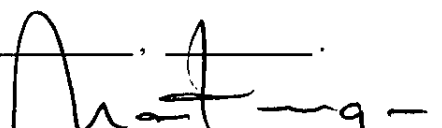
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Alejandro Montemayor	10340 Avenida del Rio Delray Beach, FL 33446	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
Member	LISA NICOLE BARNARD	1126 S. FEDERAL HWY #153 FORT LAUDERDALE FL 33316	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
Member	PETER LEWIS	3001 N.W. 46 TH AV. BLDG. 12 #209 LAUDERDALE LAKES, FL 33313	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
Member	Constanza Ochoa	1701 S.W. 23 RD ST. Ft. Lauderdale, FL 33319	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
Member	Suzanne Bossong	6437 SW 23 St - MIAMI FL 33023	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Laura L. Swags	2082 Bonnie St. Boca Raton, FL 33486	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

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

Dated _____



 Signature of a member or authorized representative of a member
 Alejandro Montemayor

 Typed or printed name of signee