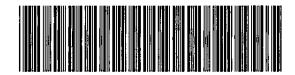
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SECRETARY OF STATE

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TO:	Registration Section Division of Corporations
SUBJE	Bio energetics Mind Body Medicine Name of Limited Liability Company
	Name of Limited Liability Company
	closed Articles of Amendment and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Maria Barajas  Name of Person
	Bioenergetics Mind Bode, Medicine Firm/Company
	2314 W. Price Blud &
	North Port, FC 34286  City/State and Zip Code
	E-mail address (to be used for future annual report notification)
For fur	ther information concerning this matter, please call:
<u></u>	Maria Bavajas at (941) 769-2474  Name of Person Area Code & Daytime Telephone Number
Enclose	ed is a check for the following amount:
\$25	.00 Filing Fee Certificate of Status S55.00 Filing Fee Certified Copy (additional copy is enclosed) S60.00 Filing Fee, 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

March 27, 2012

MARIA BARAJAS 2314 W. PRICE BLVD. NORTH PORT, FL 34286

SUBJECT: BIOENERGETICS MIND BODY MEDICINE, LLC

Ref. Number: L11000074010

We have received your document for BIOENERGETICS MIND BODY MEDICINE, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The second page of the amendment wasn't received, therefore I've enclosed a blank page for you to complete.

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) 245-6051.

Leslie Sellers Regulatory Specialist II

Letter Number: 812A00010349

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Buchergetics Mind Body Medicane, 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 <u>Co-24-9011</u> and Florida document number <u>LII 000074 010</u>	ત વશ્કાંથુ	ned	
This amendment is submitted to amend the following:			
A. If smending name, enter the new name of the limited liability company here:			
The new name trust he distinguishable and end with the worlds "Limited Liability Company," the designation "LLC" or "LLC."	the abi	nevial.	iog
Enter new principal offices address, it applicables / Same			
(Principal office address MUST BE A STREET ADDRESS)			_
Enter new mailing address, if applicable:  (Mulling address MAY BE A POST OFFICE BOX)			- -
B. It immending the registered agent and/or registered office address on our records, enter the nan registered agent and/or the new registered office address here:	ne of	the n	<u> </u>
Name of New Resistered Agent: Same	7.56 - 66 - 7.56	2	
New Registered Office Address	15 T	2	, N°∴NE EZFRONDE -
Enter Florido sweet address of	### 	7	E CONTRACTO
; Florida	100	34	
City Zilli	ζ <i>Έβι</i> 532	(P)	U
New Registered Agent's Signature, if changing Registered Agent:	- m	<b>6</b> )	

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to camply with the provisions of all standes 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. Since

If Changing Registered Ayeut, Stanature of New Registered Agent

MGR " Manager

Same

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:

MGRM=	HGRN = Managing Member					
Title	Name	Address	Type of Action			
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D. If amen	ling any other information, enter chang	e(s) here: (Aturch additional sheers, if necessary.)	<del></del>			
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AFORPA			· <b>-</b>			
Dated	3/28/12	·				
	Stenature of a member	or authorized representative of a member				
	$\checkmark$	Maria Bard Cos or printed name of signer	rosanti d (1987) vez			

Page 2 of 2

Filing Fee: \$25,00