Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

Electronic Filing Cover Sheet

(((H11000241561 3)))



H110002415613ABCV

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To:

Division of Corporations

Fax Number

1 (850)617-6383

From:

Account Name

: CORPORATE CREATIONS INTERNATION

Account Number : 110432003053

Phone

: (561)694-8107

Fax Number

: (561)694-1639

**Enter the email address for this business entity to be used for fu annual report mailings. Enter only one email address

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN YOGA SOUTH PALM BEACH, LLC

Certificate of Status	0
Certified Copy	0
Paga Count	03
Estimated Charge	\$25.00

T. CLINE

001 - 6 2011

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability	COMPANY AS IT NOW ADDRESS	LLU			
(Name of the Limited Liability (A Florida I	imited Liability Company)	TO THE TAXABLE PARTY			
The Articles of Organization for this Limited Liability C	ompany were filed on	09/28/2011	and ass	igned	
Florida document numberL11000110826			- .	_	
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limi	ted liability company her	<u>e</u> :			
YOGA P	ALM BEACH, LLC				
The new name must be distinguishable and end with the worn"L.L.C."	ds "Limited Liability Compa	ny," the designation "LI	LC" or the a	ibbrevia	tion
Enter new principal offices address, if applicable:					_
(Principal office address MUST BE A STREET ADDR	ESS)				_
			A SE		_
			2 2	8	***
Enter new mailing address, if applicable:			ĀĀ	~	446
(Mailing address MAY BE A POST OFFICE BOX)			SE XX	Ċ	- 1
			1,00	4 K	- [7
			- P-1 P-7	က	_ (
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr	ered office address on c <u>ess here</u> :	our records, enter th		f etre 1	<u>1èw</u>
Name of New Registered Agent:		·			_
New Registered Office Address:					_
	Ent	ter Florida street addr	ess		
		, Florida			
- 	Çity		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

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

	<u>Name</u>	<u>Address</u>	Type of Actio
<u>-</u>			Add Remove
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	ng any other information, enter chan	ge(s) here: (Attach additional sheets, if nacessar	(אָע
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Page 2 of 2

Filing Fee: \$25.00