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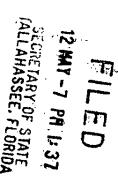
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D. BRUCE

MAY 0 8 2012

**EXAMINER** 

## **COVER LETTER**

Division of Co	orporations		•			
SUBJECT:	MEN'S HEALTH (	ENTER BRANDO	ON LLC			
	<u> </u>	ted Liability Company	, , , , , , , , , , , , , , , , , , ,			
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.				
Please return all corresp	condence concerning this matter	to the following:				
		James A DeRespino				
		Name of Person				
	MEN'S HEA	MEN'S HEALTH CENTER BRANDON LLC				
	•	Firm/Company				
	1085	10852 FOREST RUN CIRCLE Address			unag Tang pinagan	
	**************************************				2	
	ВІ	RADENTON FL 3421	1		AHAS	
	City/State and Zip Code			:.	SECTION TO	ाग
	J	imbobeast@aol.com			E FI	O
	E-mail address: (	to be used for future annual rep	port notification)		1:37 STATE CORID	
For further information	concerning this matter, please of	all:			A AG	
Jan	nes DeRespino	at ( 941 )	756-98	B11		
Name	of Person		Daytime Telepho	ne Number	<del></del>	
Enclosed is a check for	the following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is e		\$60.00 Filing Certificate o Certified Co (additional c	f Status & Py	sed)
MAII	LING ADDRESS:	STREET/	COURIER ADI	DRESS:		

TO:

**Registration Section** 

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MEN'S HEALTH CENTER BRANDON LLC

( <u>Name of the Limited Liability Com</u> (A Florida Limited	<b>pany as it now appears</b> [Liability Company]	on our records.)				
The Articles of Organization for this Limited Liability Compart Florida document numberL12000020482	ny were filed on	02/13/2012	and assign	ned		
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited lis	ability company here	;				
The new name must be distinguishable and end with the words "Lis" L.L.C."	nited Liability Compan	y," the designation "L	LC" or the abb	reviation		
Enter new principal offices address, if applicable:						
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>		77 AT.		
		L C	12	,		
Enter new mailing address, if applicable:		AHAŞS	F			
(Mailing address MAY BE A POST OFFICE BOX)	The second secon	m <sub>o</sub>	29 Mil	<del></del> .		
Mauric andress WAT BE A TOST OF FICE BOAY		<u> </u>				
			<del>5</del> 0			
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he		ır records, <u>enter t</u>	he name of t	the new		
Name of New Registered Agent:						
New Registered Office Address:	Finta	er Florida street addi				
	Liner r with street address					
	, Florida					
	Citv		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 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>Address</u> **Type of Action** <u>Name</u> WMD FL LLC mgrm 10852 FOREST RUN CIRCLE ☐ Add BRADENTON, FL 34211 ∇ Remove ☐ Add Remove ☐ Remove Remove □ Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) April 23 2012 Dated\_ Signature of a member or authorized representative of a member James A DeRespino Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00