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EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

_{arct.} Akasha Wellness, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sandra Elaine Fuentes

Name of Person

Firm/Company

9511 Collins Ave, PH 1506

Address

Surfside, FL 33154

City/State and Zip Code

sandra@akashawellness.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sandra Elaine Fuentes

_305,606-0182

Name of Person

Area Code & Daytime Telephone Number

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 enclosed)

□\$60.00 Filing Fee,
Certificate of Status &
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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

sha Wellness, LLC			
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Company were filed on Febru	uary 13, 2012	_ and assi	gned
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New Registered Agent's Signature, if changing Registered Agent:

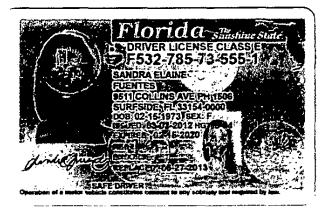
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>: MGR = Manager MGRM = Managing Member <u>Title</u> <u>Name</u> <u>Address</u> **Type of Action** Add Remove

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		TALLAHASSEE, FLORIDA	Remove
		SS. F.	PP Add
	,		Remove
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D. If ar	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Amending Managing Member's name from Sandra
	Fuentes Blavia to Sandra Elaine Fuentes. Copy of Divorce
	Decree and driver's license enclosed.
Dated _	Signature of a member or authorized representative of a member
	Sandra Elaine Fuentes
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00



2013 AUG -1 PH 4: 05

IN THE CIRCUIT COURT OF THE 11TH JUDICIAL CIRCUIT IN AND FOR MIAMI-DADE COUNTY, FLORIDA

IN RE: THE MARRIAGE OF

FAMILY DIVISION

ANTONIO BLAVIA,

CASE NO.: 2013-009443 FC 47

Petitioner/Husband,

FLA. BAR NO. 316857

and

SANDRA BLAVIA,

Respondent/Wife.



FINAL JUDGMENT OF DISSOLUTION OF MARRIAGE

THIS MATTER came before the Court on the Husband's Verified Petition for Dissolution of Marriage and Other Relief. The Husband is represented by Richard J. Preira, Esquire and the Wife is represented by Jonathan H. Green, Esquire. The Court has reviewed the file and being otherwise fully advised in the premises, finds as follows:

- 1.0 The Court has jurisdiction over the parties hereto and the subject matter hereof.
- 2.0 The Wife, Sandra Blavia, and the Husband, Antonio Blavia, were married to each other on November 2, 2002 in Miami-Dade County, Florida.
- 3.0 The parties have been residents of Miami-Dade County, Florida for more than six
 (6) months immediately preceding the filing of the *Petition*.
- 4.0 There are two (2) children born as a result of this marriage, to wit: A.B., born February 19, 2005 and M.A.B, born October 17, 2007. No other children are anticipated or contemplated. As to the minor children referenced herein:
 - 4.1 The United States is the country of habitual residence.

- 9.2 Implementing an Income Deduction is not in the children's best interest. The obligor resides in the State of Florida. The delay which might be caused as a result of transit through the system is not in the children's best interest. The Father has an excellent history of paying support to the family.
- 9.3 In the event of a delinquency, an Income Deduction Order shall be entered.
 - 10.0 The Wife's name is restored to Sandra Fuentes.
- 11.0 The Court retains jurisdiction of the parties hereto and the subject matter hereof for the purpose of enforcement and modification of the provisions of this *Final Judgment* and for any other reason permitted by law.

DONE AND ORDERED in Chambers at Miami-Dade County, Florida this _____ day

of May, 2013.

MAY -1 2013

CIRCUIT COURT HADGE M. Pooler
County Court Judge

Copies furnished to:

Richard J. Preira, Esq., SMGQ Law, 201 Alhambra Circle, Suite 1205, Coral Gables, Florida 33134 Jonathan H. Green, Esquire, Jonathan H. Green & Associates, P.A., 799 Brickell Plaza, Suite 700, Miami, FL 33131.

G:\Blavia, Antonio\Orders\O.Final.Judgment.doc

STATE OF FLORIDA, COUNTY OF DADE THIS IS TO CERTIFY THAT THE FOREGOING IS A TRUE AND CORRECT COPY OF THE DOCUMENT ON RICE OR OF PUBLIC RECORD IN THIS OFFICE WITNESS MY HAND AND OFFICIAL SEAL THIS DAY OF MAY UT 2013

THIS DAY OF MAY U 1 2018
HARVEY RUYIN, CLEAK OF CIRCUIT COURT

AUG - 1 PM 4: 06