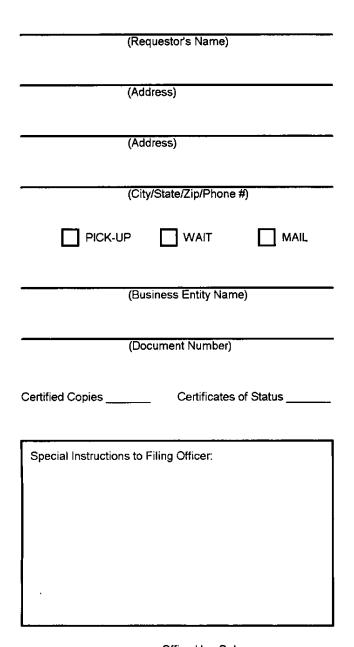
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EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

🥋 Real Life Lab, 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:

Bryan J. Yarnell, Esquire

Name of Person

Gilbert | Yarnell

Firm/Company

11000 Prosperity Farms Road, Suite 205

Address

Palm Beach Gardens, FL 33410

City/State and Zip Code

eservice@gilbertyarnell.com

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

For further information concerning this matter, please call:

Bryan J. Yarnell

_,561、622-1252

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)

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**

Real Life Lab, LLC			
(Name of the Limiter	I Liability Company as it now appear: A Florida Limited Liability Company)	s on our records.)	
The Articles of Organization for this Limited I Florida document number <u>L13000159496</u>			
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability company here	2 :	
The new name must be distinguishable and end w "L.L.C."	ith the words "Limited Liability Compar	ny," the designation "LLC" or the abbreviation	
Enter new principal offices address, if appli-	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		
		F. F.	
		\$3.50 20.00	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	BOX		
		<u>ි </u>	
B. If amending the registered agent and registered agent and/or the new registered of		ur records, <u>enter the name of the ne</u>	
Name of New Registered Agent:	Bryan J. Yarnell, Esq.		
New Registered Office Address:	11000 Prosperity Farms Road, Suite 205		
	Ent	er Florida street address	
	Palm Beach Gardens	, Florida 33410	
	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 648, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby config m that life limited liability company has been notified in writing of this change.

If Charging Registered Agent, Signature of New Registered Agent

Page 1 of 3

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>	Name	Address	Type of Action
MGRM	Eric Snyder	258 S.E. 6th Ave.	Add
		Suite 8	Remove
		Delray Beach, FL 3348	
MGRM	Real Life Recovery Delray, Inc.	258 S.E. 6th Ave.	Add
		Suite 8	Remove
		Delray Beach, FL 3348	3
		ALA:	E Add
		S	Remove
			Add
		·····	Remove
			Remove
			_
			Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if	necessary.)
Dated December 2nd, 2013.	
Se Sell	
Signature of a member or authorized representative of a member	
Eric Snyder Typed or printed name of signee	
Page 3 of 3	
Filing Fee: \$25.00	
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