## L14000038231

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	: #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



900287932079

07/15/16--01017--010 \*\*35.00

ZOTO JUL 18 P 2: 29
SECRETY AY LE CIRTE
TALLAHASSEEL FLORIDA

JUN 1 9 2013 BRUCE

## COVER LETTER ,

	Registration Sec Division of Corp			
CHRIEC	JUST4BOD	Y LLC		
SUBJEC	.1:	Name of Limi	ited Liability Company	
The encle	osed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please re	turn all correspor	ndence concerning this matter	to the following:	
		JENNY BRUGUERA		
			Name of Person	
		JUST4BODY LLC		
			Firm/Company	
		5901 NW 151 ST SUIT	E 130	
		· · · · · · · · · · · · · · · · · · ·	Address	
		MIAMI LAKES FLORII	DA 33014	
		J4BODY@GMIIL.COM	City/State and Zip Code	
			to be used for future annual report notific	ation)
For furth	er information co	oncerning this matter, please ca	all:	
JENNY	BRUGUERA		786 542 0747 at ()	7216
	Name of	f Person	Area Code Daytime	Telephone Number 19
Enclosed	l is a check for th	e following amount:		T T
\$25.0	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

JUST4BODY LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L14000038231		and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	5901 NW 151 ST	
Principal office address MUST BE A STREET ADDRESS)	SUITE 130	
	MIAMILAKES FLORIDA 3301	4
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		enter the name of the
Name of New Registered Agent:		m-c oo
New Registered Office Address:	E.A. Eli M. e. d.	
	Enter Florida street address	188 P
<del></del>	, Flori	Zio 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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	MARRERO LUIS M	5901 NW 151 ST	
		SUITE 130	■ Remove
		MIAMI LAKES FL 33014	□ Change
			Add
			□ Remove
			☐ Change
		<del> </del>	Add
			□ Remove
			☐ Change
		·	Add Add
		<del></del>	Remove .
			Change
			☐ Remove
			☐ Change
	<u> </u>		□ Add
		<u></u>	□ Remove
			□ Changa

. If amending any other information, enter change(s) here: (Attach additional sheets	s, if necessary.)
•	
	20 E
	AR S
	2 - B - L
	2: 2°
Effective date, if other than the date of filing:	(optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90.  Note: If the date inserted in this block does not meet the applicable statutory filing requirem document's effective date on the Department of State's records.	days after filing.) Pursuant to 605.0207
the record specifies a delayed effective date, but not an effective time, at 1 ) The 90th day after the record is filed.	12:01 a.m. on the earlier of
Dated	
Coul Coulles	
Dated  JULY /12 , 2016  Signature of a member or authorized representative of a member  JENNY BRUGUERA	er .
Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00