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## FASSETT, ANTHONY & TÄYLOR, P.A.

#### ATTORNEYS AT LAW

LADD H. FASSETT ROBERT W. ANTHONY JOHN A. TAYLOR PHIL A. D'ANIELLO SPENCER GLEDHILL SHAY B. COHEN JAMES N. CARLIN, JR.

# 1325 WEST COLONIAL DRIVE ORLANDO, FLORIDA 32804

TELEPHONE (407) 872 - 0200 TELECOPIER (407) 422 - 8170 SPENCER M. GLEDHILL

Direct Extension: 3008 E-Mail: sgledhill@fassettlaw.com http://www.fassettlaw.com

April 1, 2016

Division of Corporations ATTN: Amendment Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re:

Amendment to Lucy's Bazar Brazil Inc.

Amendment to Fusion Sports Nutrition LLC

Dear Division of Corporations:

Please find enclosed the signed amendments for each of the above referenced entities together with their respective filing fees. Once the amendments have been filed kindly provide our office with a receipt documenting these transactions. I have enclosed a self-addressed stamped envelope for your convenience.

Thank you for your assistance and cooperation in this matter. If you have any questions please do not hesitate to call.

Sincerely,

Spencer M. Gledhill, Esq.

SMG/kas Enc.

### **COVER LETTER**

TO:	Registration Division of (	Section Corporations			
CHRIC		SPORTS NUTRITION LLC			
Name of Limited Liability Company					
		of Amendment and fee(s) are sub	•		
		ROBERT W. ANTHONY	•		
		<del></del>	Name of Person		
		FASSETT, ANTHONY &	t TAYLOR, P.A.		
Firm/Company					
1325 WEST COLONIAL DRIVE					
			Address		
ORLANDO, FL 32804					
City/State and Zip Code volpatojoey@gmail.com  E-mail address: (to be used for future annual report notification)					
					For furt
JOSE VOLPATO 407 ) 353-2845					
	Nan	e of Person	Area Code Daytime	Telephone Number	
Enclose	ed is a check fo	or the following amount:			
\$25	i.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

FUSION SPORTS NUTRITION LLC	
( <u>Name of the Limited Lia</u> (A Flo	ability Company as it now appears on our records.) orida Limited Liability Company)
The Articles of Organization for this Limited Liabilit	ty Company were filed on 8/26/2014 and assigned and assigned
This amendment is submitted to amend the following	z,
A. If amending name, enter the new name of the	limited liability company here:
Not Applicable	
The new name must be distinguishable and contain the words "	'Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	Not Applicable
(Principal office address MUST BE A STREET AL	DDRESS)
	<del>.</del>
Enter new mailing address, if applicable:	Not Applicable
(Mailing address MAY BE A POST OFFICE BOX	2
	· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or registered agent and/or the new registered office a	egistered office address on our records, enter the name of the ne
Name of New Registered Agent:	ot Applicable
New Registered Office Address:	Enter Florida street address
·	Florida

#### 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

Page 1 of 3

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

Title .	<u>Name</u>	Address	Type of Action		
MGRM	RICARDO ROCHA 5185 DOVE TREE STREET		□ Add		
		ORLANDO, FL 32811	Remove		
			☐ Change		
MGR	JOSE VOLPATO	5313 DOVE TREE STREET	Add		
		ORLANDO, FL 32811	□ Remove		
			☐ Change		
MGR	MILENA VOLPATO	5313 DOVE TREE STREET	Add		
		ORLANDO, FL 32811	Remove		
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	date of filing:	31, 2016	option (option of that 90 days after grequirements, this	filing.) Pursuant to	605.0 listed
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Filing Fee: \$25.00