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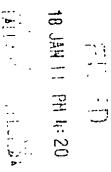
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COVER LETTER

TO:

TO:	Registration Section Division of Corporations		
SUBJI	Evlution Nutrition, LLC		
000		ne of Limited Lin	ability Company
Dear S	ir or Madam:		
The en	closed Registered Agent/Registered Offi	ice Change and	fee(s) are submitted for filing.
Please	return all correspondence concerning thi	is matter to the f	following:
Eric D). Isicoff		
	Name of Person		_
Isicof	f Ragatz		
	Firm/Company		_
601 B	brickell Key Drive, Suite 750		
	Address	,	_
Miam	i, FL 33131		
	City/State and Zip Code		_
isicof	f@irlaw.com		
E	-mail address: (to be used for future ann	ual report notifi	cation)
For fur	ther information concerning this matter,	please call:	
Eric D). Isicoff	305 at (373-3232
,	Name of Person		Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Reg Div P.C	AILING ADDRESS: gistration Section rision of Corporations b. Box 6327 lahassee, Florida 32314
	Enclosed is a check for the following	amount:	
	☑ \$25 Filing Fee	□ \$5	5 Filing Fee & Certified Copy
INHST	8 (2/14)		

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

. Name of	the limited liability company:	ution Nutriti	ion, LL	С	
. (a) 1560	Sawgrass Corporate Pkwy, 4	th Floor	(Ъ	4631 Jo	hnson Road, Suite 1
	Principal office address of limited liability (Note: MUST BE STREET ADDR.		_ (5		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
Suni	rise, FL 33323		_	Coconut	t Creek, FL 33073
1/21/	15		_		19013
. (a) Darre	Date of filing/registration in Floren Heitner	rida	4.		Document number
Register Heitr Registe	red Agent and Registered Office shown on her Legal PLLC red Office Address (MUST BE FLORI 5 NE 7th Street				- 0
	Lauderdale		33304		量
NEW F	ff Ragatz Registered Office Address: Brickel Key Drive, Suite 750				PH 4: 20
Miam	ni	. FL ³	33131		-
se change or gent will be it as/were auth the articles of a series	changes are made, the Florida streed dentical. Or, in the case of a Florida orized by an affirmative vote of the organization or the operating agreed the control of the operating agreed the control of the operative of a remove of a re	et address of the limited liable inembers of the liable ment of the liable member.	he regis pility co the limi imited li	tered office mpany, it is ted liability ability con	prida, it is hereby confirmed that after and the business office of the registeres hereby confirmed that the change(s) y company or as otherwise provided in a negative. Printed or typed name of signec acity. I further agree to comply with the duties, and I am familiar with and accept, F.S. Or, if this document is being filed the limited liability company has been

FILING FEE: \$25.00

INHS18 (2/14)