

(Requestor's Name)				
(Address)				
(Address)				
(Cit	ry/State/Zip/Phor	ne #)		
PICK-UP	MAIT WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate	es of Status		
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COVER LETTER

Registration Section

TO:

INHS18 (2/14)

Divis	sion of Corporations					
SUBJECT:	BODY WORKS PLUS, LLC					
SUBJECT:	Name of Limited Liability Company					
Dear Sir or M	1adam:					
The enclosed	Registered Agent/Registered Offic	ce Change and	fee(s) are submitted for filing.			
Please return	all correspondence concerning this	s matter to the	following:			
FRED HAL	.L					
	Name of Person		_			
BODY WO	RKS PLUS, LLC					
	Firm/Company		_			
803 NW 71	TH STREET.					
	Address		_			
FORT LAU	IDERDALE, FLORIDA 33311			17 PALE		
	City/State and Zip Code		_	18 蜀		
FUELTEC	H2033@GMAIL.COM			T FEB 13 PH 3: 33		
E-mail	address: (to be used for future annual	ual report notif	ication)	PM 3		
For further in	nformation concerning this matter,	please call:		PH 3: 33		
FRED HAL	L	404 at (567-9043	,		
	Name of Person		Area Code & Daytime Telephone N	Jumber		
Regis Divis Clifto 2661	EET/COURIER ADDRESS: stration Section sion of Corporations on Building Executive Center Circle thassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Encl	osed is a check for the following	amount:				
☑ \$2	25 Filing Fee	□ \$5	55 Filing Fee & Certified Copy			

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

1. Na	ame of the limited liability company: BODY WOR	KS PLUS,	LLC		
2. (a)	803 NW 7TH STREET	(b)_	(b) 803 NW 7TH STREET		
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)_	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	FORT LAUDERDALE, FLORIDA 33311	F	ORT LAUDERDALE, FLORIDA 33311		
	11/17/2015		5000194659		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	TERRELL HALL				
	Registered Agent and Registered Office shown on the records of 803 NW 7TH STREET	the Florida De	pt. of State:		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)			
			A AC		
	FORT LAUDERDALE , FI	33311	7 FEE		
(b)	FRED HALL		FEB 13		
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	l Office addre	SS: 7		
	803 NW 7TH STREET		PH 3: 33		
	NEW Registered Office Address:				
	FORT LAUDERDALE	. 33311			
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-			
the cha agent v was/we the arti	imited liability company is not organized under the la ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	f the register iability compof the limite the limited liab	red office and the business office of the registered pany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in		
٠.	sture of a member or authorized representative of a member		•••		
provisi the obl to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	ree to act in e performan ed for in Cho hereby conj	this capacity. I further agree to comply with the ce of my duties, and I am familiar with and accept spter 605, F.S. Or, if this document is being filed irm that the limited liability company has been		
Signate	fre of Registered Agent				