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(Business Entity Name)
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COVER LETTER

TO: Registration S Division of Co			
SUBJECT: Body and S	Soul Solutions		•
3000001. <u></u>		ited Liability Company	• •
			ı
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	DONALD A ROTHMAN		
		Name of Person	
	DOMAY A MIX COURT COLUM	THANK	
	BODY AND SOUL SOLU	Firm/Company	
	8177 GLADES RD STE 2		
		Address	
	BOCA RATON, FL 33434		
		City/State and Zip Code	
	GLOBALCLIENTRELATION (A. 1997)		3'6' . 3' . S
		to be used for future annual report no	unication)
For further information (concerning this matter, please ca	all:	
DONALD A ROTHMA	N	at (954) 816-3996	
	of Person		me Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 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

BODY AND SOUL SOLUTIONS LLC

(Name of the Limited Liability Company as it now appears on our records.)

The Articles of Organization for this Limited Liability Company were filed on 07/07/2016 and assigned	ed
Florida document number L16000128520	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
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:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:	<u>he new</u>
Name of New Registered Agent:	
New Registered Office Address:	n
Enter Florida street address	≡ m
Florida Florida	
City Zipsode 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 we	ulah ah -

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>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR_	ADRIANO M REIS	8177 GLADES RD SUITE 216	Add
		BOCA RATON, FL 33434	Remove
			Change
MGR DONALD A ROTHMAN	DONALD A ROTHMAN	8177 GLADES RD SUITE 216	B Add
		BOCA RATON, FL 33434	☐ Remove
		☐ Change	
		Remove	
			Change
		-	□ Remove
		Change	
		- Change	
		GFARL COMMENT	
			PH STATE
			Remove
		□ Change	

If amer	nding any other information, enter change(s) here: (Attach additional sheets, if n	necessary.)
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If an effect Note: I document	(operive date, if other than the date of filing:	this date will not be listed as t
THE :	votir day arear the record is med.	
Dated <u>M</u>	Signature of a member or authorized representative of a member	
	Typed or printed name of signee	FILED CAETARY B 16N OF CORI
	Page 3 of 3	FSTATE PORATION M 2: 21

Filing Fee: \$25.00