## 108000038VI

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	Requestor's Name)
	Address)
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PICK-UP	
	Business Entity Name)
(0	ocument Number)
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## COVER LETTER

TO: Amendment Section Division of Corporations

· · · · · · · · · · · · · · · · · · ·	•			
NAME OF CORP	ORATION: B.NO FI	tness & Soci	al Studio J	wζ.
DOCUMENT NU	MBER: <u>NO80000</u>			
The enclosed A <i>rticl</i>	les of Amendment and fee are su	bmitted for filing.		
Please return all cor	respondence concerning this ma	tter to the following:		
	Marie F	Name of Contact Person	n	<del></del> -
	103 5th IPI	Firm/ Company		
	Winter F	Address City/ State and Zip Cod	33 8 8D	_ <del>_</del>
	MF1e1d51967 E-mail address: (to be us	a amail-a	5M notification)	
For further informa	tion concerning this matter, pleas	e call:		
Eugene	CTCld5 e of Contact Person		) 585 5017 de & Daytime Telephone Nur	nber
	for the following amount made p			
\$35 Filing Fee	□ <b>\$</b> 43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
A D P.	ailing Address mendment Section vision of Corporations O. Box 6327	Ameno Divisio Clifton	Address Iment Section on of Corporations Building	
T	llahassee. FL 32314		Executive Center Circle assee, FL 32301	

## Articles of Amendment

to

## Articles of Incorporation

of

B.NU IT	Thress & Social 3th	udio Fac		
1	(Name of Corporation as currently	filed with the Florida Dept.	of State)	
Mos	00000 2440			
Ĭ	(Document Number of C	Corporation (if known)		
Pursuant to the provi its Articles of Incorp	isions of section 607.1006, Florida Statutes, this Fooration:	lorida Profit Corporation ad	opts the following amen	idment(s) to
A. If amending nam	ne, enter the new name of the corporation:			
B.W. 0		Inc.		new
"Corp.," "Inc.," or	nguishable and contain the word "corporation, Co.," or the designation "Corp," "Inc," or "C professional association," or the abbreviation "P.	o". A professional corpora	rated" or the abbrevia tion name must contain	ition 1 the
	ipal office address, if applicable:			_
(Principal office and	tress <u>MUST BE A STREET ADDRESS</u> )	N/A		
		1.		
				_
(Mailing address	ing address, if applicable: s <u>MAY BE A POST OFFICE BOX</u> )	41)9	TAGE BE	• •
	·	VO-Tra-		111
			2	
			<u> </u>	
	registered agent and/or registered office addres	ss in Florida, enter the nam	e of the	ご
<u>new registeredla</u>	gent and/or the new registered office address:		<u> </u>	
<u>Name of Ne</u>	w Registered Agent NA	· • · · · · · · · · · · · · · · · · · ·	(1) (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	
ļ	(Florida stree	t address)		
<u>New Registe</u>	ered Office Address: 🕠 👝	<del></del> ,	Florida	
	(0	lity)	(Zip Code)	
New Registered Age	ent's Signature, if changing Registered Agent:			
	ppointment as registered agent. I am familiar wi	th and accept the obligations	of the position.	
}	No			
ļ	Signature of New Res	istered Agent, if changing	<del></del>	
'				

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President, V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = ChiefExecutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change.

Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	PT	John Doe				
X Remove	<u>v</u>	Mike Jones				
<u>X</u> Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address			
1) Change						
Add						
Remove						
2) Change						
Add						
Remove						
3 ) Change			- Ht-2			
Add	-	<del>-</del>				
Remove						
Kemove						
4) Change		<del></del>				
Add						
Remove			<u> </u>			
5) Change	<del></del>					
Add						
Remove						
6) Change			_			
Add						
Remove						

. If amending or	adding additional Artical sheets, if necessary).	icles, enter chang	e(s) here:			
(attach additio <b>h</b> t	al sheets, if necessary).	(Be specific)				
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	, if other than the
late this document was signed.	
Effective date if applicable: 3/2//8 (no more than 90 days after amendment file date)	·
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date locument's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statemen must be separately provided for each voting group entitled to vote separately on the amendment(s):	ı
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 3-27-18	
Signature	
(By a director, president or other officer - if directors or officers have not been	<del></del>
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Eugene Fields	
(Typed or printed name of person signing)	
Preside	
(Title of person signing)	<del></del>