

P070000122500

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

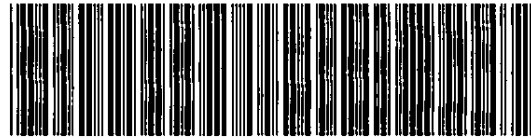
(Business Entity Name)

(Document Number)

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2010 MAY 27 AM 8:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OK
5/28/10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Quick Weight Loss Centers SAP, Inc.
Name of Corporation

DOCUMENT NUMBER: P07000122500

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

Damaso W. Saavedra, Esq.
Name of Contact Person

Saavedra, Pelosi, Goodwin & Hermann
Firm/Company

312 S.E. 17th Street, Second Floor
Address

Fort Lauderdale, Florida 33316
City/State and Zip Code

kdavis@lawspgh.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kathy R. Davis at (954) 767-6333
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Quick Weight Loss Centers SAP, Inc.
2. The principal office address: 4350 West Sunrise Boulevard, Suite 122, Plantation, Florida 33313
3. The mailing address (if different): 4350 West Sunrise Boulevard, Suite 122, Plantation, Florida 33313
4. Date of incorporation/qualification: 11/09/2007 Document number: P07000122500
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Jerome L. Tepps

10167 West Sunrise Boulevard, Third Floor

Plantation, Florida 33322

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Damaso W. Saavedra, Esq.

312 S.E. 17th Street, Second Floor

P.O. Box NOT acceptable

Fort Lauderdale, Florida 33316

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]
Signature of an officer or director

LYNN S. ALLEN, SECRETARY
Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]
Signature of Registered Agent

May 24 2010
Date

If signing on behalf of an entity:

[Signature]
Typed or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314