Ro7000122500

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RA Change



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	t					
Name of Contact Person at (954) 767-6333 Name of Contact Person Area Code & Daytime Telephone N	Jumber					
Enclosed is a \$35.00 check made payable to the Department of State.						
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Street Address: Amendment Section Division of Corporations Clifton Building						
Tallahassee, FL 32314 2661 Executive Center Circle	2					

Tallahassee, FL 32301

TO:

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

1

stateme of char	nge is submitted for a cor	poration organized	507.1508, or 617.1508, Flo d under the laws of the Stat d agent, or both, in the Stat	e of Florida
1. The name of the	ne corporation: Quick	Weight Loss	Centers SAP, Inc.	
2. The principal	office address: 4350 W	est Sunrise Bo	ulevard, Suite 122, Pl	antation, Florida 33313
3. The mailing ac	Idress (if different): 435	0 West Sunrise	e Boulevard, Suite 12	2, Plantation, Florida 33
4. Date of incorp	oration/qualification:	11/09/2007	Document number:	P07000122500
	street address of the curr ment of State: (If resigne		at and registered office on fi	ile with the
•	Jerome L. Tepps			
	10167 West Sunrise	e Boulevard, Ti	hird Floor	超量力
•	Plantation, Florida	33322		聖三
6. The name and (if changed):	street address of the new	registered agent (i	f changed) and /or registere	FILED AND SERVICE FILED
	Damaso W. Saaved	dra, Esq.		
	312 S.E. 17th Stree	t, Second Floo	r	
	Fort Loudordolo Ele	P.O. Box NOT ac	ceptable ,	
m	Fort Lauderdale, Flo			
-			dress of the business office	
Such change was authorized by th	s authorized by resolution board, or the corporation	on duly adopted by ion has been notifi	y its board of directors or led in writing of the chang	by an officer so
	e of art officer or director	<u> </u>	LYNN S. A	e and title
I hereby decept I further agree to of my duties, and document is being corporation has	the appointment as regi o comply with the provis d I am familiar with and ng filed mekily to reflect been notifitian writing	stered agent and a sions of all statute l accept the obliga t a change in the r of this change.	gree to act in this capacit s relative to the proper an tion of my position as reg egistered office address, I	d complete performance istered agent. Or, if this hereby confirm that the
If signing on be	nature of Registered Agent half of an entire	<u>.</u>	rim 24 Date	2010

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