

P09000063299

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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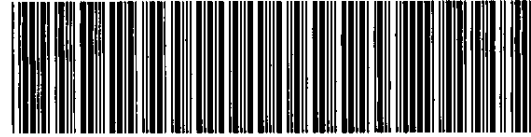
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TALLAHASSEE, FLORIDA

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HELD & ISRAEL

6320 ST. AUGUSTINE ROAD
SUITE 2
JACKSONVILLE, FLORIDA 32217

www.heldandisrael.com

KIMBERLY HELD ISRAEL
khisrael@hilawfirm.com

EDWIN W. HELD, JR.
(1947 - 2008)

TELEPHONE
904.398.7038

TOLL FREE
888.398.7001

FACSIMILE
904.398.4283

September 10, 2010

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

RE: Statement of Change of Registered Office or Registered
Agent or Both for Corporations

Dear Sir/Madam:

Please find enclosed the original Cover Letters and original
Statements of Change of Registered Office or Agent or Both for
Corporations for the following entities:

- 1) Almost Heaven Fitness Management, Inc.;
- 2) Riverfit, LLC;
- 3) Just Fitness of Mandarin, LLC;
- 4) Just Fitness Avenues, LLC;
- 5) Just Fitness St. Johns, LLC;
- 6) KAP-FIT I, LLC; and
- 7) SamBam Fitness, LLC.

Also enclosed is our Firm's check #4873 in the amount of \$245.00
to cover your fees.

Thank you in advance for your assistance. Should you have any
questions, or require any further information, please do not hesitate
to call.

Very truly yours,

HELD & ISRAEL



Kimberly Held Israel

KHI/abr
Enclosures
cc: client (via e-mail)

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Almost Heaven Fitness Management, Inc.
Name of Corporation

DOCUMENT NUMBER: P09000063299

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:

Kimberly H. Israel, Esq.

Name of Contact Person

Held & Israel

Firm/Company

6320 St. Augustine Rd., Suite #2

Address

Jacksonville, FL 32217

City/State and Zip Code

khisrael@hilawfirm.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kimberly H. Israel, Esq.

Name of Contact Person

at (904)

398-7038

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: Almost Heaven Fitness Management, Inc.
2. The principal office address: 4446-1A Hendricks Ave. #210
Jacksonville, FL 32207
3. The mailing address (if different): 6320 St. Augustine Rd., Suite #2
Jacksonville, FL 32217
4. Date of incorporation/qualification: 7/27/2009 Document number: P09000063299
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)

Ansbacher & Associates, P.A.

8818 Goodbys Executive Drive, Suite 100

Jacksonville, FL 32217

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

Held & Israel

6320 St. Augustine Rd., Suite #2

Jacksonville, FL 32217

P.O. Box NOT acceptable

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

JAY KAPLAN
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity, 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.

Kim H. Israel
Signature of Registered Agent

9-10-10
Date

If signing on behalf of an entity:

Kim H. Israel
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
CR2E045 (8/05)

FILED
2009 SEP 14 P 1:57
TALLAHASSEE, FLORIDA
SECRETARY OF STATE