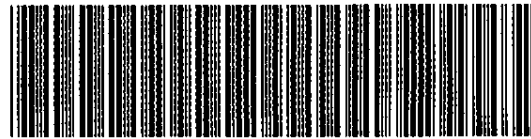


P10000013995



600210438926

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

08/01/11--01027--011 \*\*52.50

Special Instructions to Filing Officer:  
CARDINAL - STAN-MER  
CAN NOT BE ONLY  
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Office Use Only  
CALLED BUT  
LEAVE AS PRES.

FILED  
11 AUG 31 PM 1:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Amend/cc  
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Amend  
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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 2, 2011

S. PAUL SLOANE  
MINDBODY LIVING INC.  
4611 SOUTH UNIVERSITY DRIVE  
DAVIE, FL 33328-3817

SUBJECT: MINDBODY LIVING INC.  
Ref. Number: P10000013995

We have received your document for MINDBODY LIVING INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

PLEASE PUT THE PRINCIPAL ADDRESS AND MAILING ADDRESS IN THE SPACE PROVIDED IF YOU ARE CHANGING BOTH.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton  
Regulatory Specialist II

Letter Number: 811A00018208

RECEIVED

11 AUG 31 AM 10:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*I am not changing the way  
Both. Nothing about the way  
I completed this indicates I am  
changing BOTH. The only address change  
is the mailing address  
as is indicated on the  
form Attached*

www.sunbiz.org

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Mindbody Living, INC.

**DOCUMENT NUMBER:** P10000013995

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

S. Paul Sloane

Name of Contact Person

Cross Core Studios, Inc.

Firm/ Company

P.O. Box 442 4611 SOUTH UNIVERSITY DRIVE

Address

DAVIE, FL. 33328-3817

City/ State and Zip Code

info@crosscorestudios.com

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

For further information concerning this matter, please call:

S. Paul Sloane

Name of Contact Person

at ( 754 )

245-2058

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee

☐ \$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)

**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

Articles of Amendment  
to  
Articles of Incorporation  
of

Mindbody Living, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P10000013995

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

Cross Core Studios, Inc.

The new

name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

**B. Enter new principal office address, if applicable:**

(Principal office address **MUST BE A STREET ADDRESS**)

**C. Enter new mailing address, if applicable:**

(Mailing address **MAY BE A POST OFFICE BOX**)

P.O. BOX 442  
4611 SOUTH UNIVERSITY DRIVE  
DAVIE, FL. 33328-3817

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent:

New Registered Office Address:

P.O. Box 442 Davie, Florida  
(Florida street address)

Davie, Florida  
(City) (Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

FILED  
11 AUG 31 PM 1:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Florida  
33328-3817  
This is the new mailing address  
SPSloan

**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)*

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
P	S. Paul Sloane	11807 SW 47 Court Cooper City, FL 33330 US	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	S. Paul Sloane	11807 SW 47 Court Cooper City, FL 33330 US	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

**E. If amending or adding additional Articles, enter change(s) here:**  
*(attach additional sheets, if necessary). (Be specific)*

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**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**  
*(if not applicable, indicate N/A)*

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The date of each amendment(s) adoption: July 22, 2011

(date of adoption is required)

Effective date if applicable: July 22, 2011

(no more than 90 days after amendment file date)

**Adoption of Amendment(s)**

**(CHECK ONE)**

☐ 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 statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast 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 July 22, 2011

Signature \_\_\_\_\_

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

S. Paul Sloane

(Typed or printed name of person signing)

President

(Title of person signing)