

PR000038741

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☒ PICK-UP    ☐ WAIT    ☐ MAIL

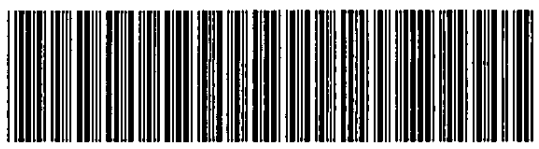
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

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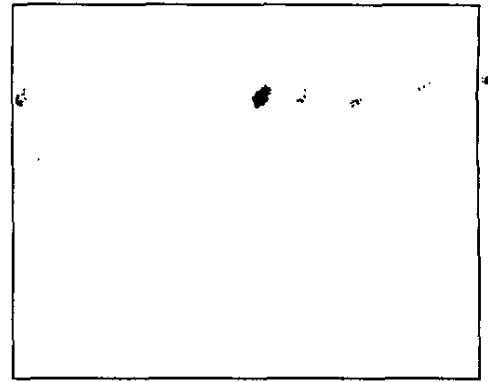
RECEIVED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2013 MAY 24 AM 11:34  
13 MAY 24 AM 11:32  
SUFFICIENCY OF FILING

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
13 MAY 24 AM 11:32

Amend Inc  
S  
5-30-13

\*00789, 00524, 00671

FLORIDA RESEARCH & FILING SERVICES, INC.  
1211 CIRCLE DRIVE  
TALLAHASSEE, FL 32301  
PHONE (850)364-8000



OFFICE USE ONLY

WALK-IN

ENTITY NAME:

PURE ADRENALINE WELLNESS CLUBB, INC.

CK# 4183 FOR \$ 35.00

PLEASE FILE THE ATTACHED AMENDMENT & RETURN THE FOLLOWING:

\_\_\_ CERTIFIED COPY

XXX STAMPED COPY

\_\_\_ CERTIFICATE OF STATUS

Examiner's Initials

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Pure Adrenaline Wellness Club Inc.  
DOCUMENT NUMBER: P13000038741

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

Please return all correspondence concerning this matter to the following:

Audrey Maselli  
Name of Contact Person

808 S. 10<sup>th</sup> Street  
Firm/Company  
Address  
Lantana FL 33462  
City/State and Zip Code

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

For further information concerning this matter, please call:

Audrey Maselli at (561) 629-4141  
Name of Contact Person Area Code & Daytime Telephone Number

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

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

13 MAY 30 AM 10:01

4117 7-153

May 29, 2013

Florida Research & Filing Services, Inc.  
1211 Circle Drive  
Tallahassee, FL 32301

SUBJECT: PURE ADRENALINE WELLNESS CLUB INC.  
Ref. Number: P13000038741

We have received your document for PURE ADRENALINE WELLNESS CLUB INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check only one box under "adoption of amendment" on page 4 of the amendment form.

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) 245-6050.

Annette Ramsey  
Regulatory Specialist II

Letter Number: 813A00013418

\* RE-SUBMITTING  
W/ CORRECTIONS  
PLEASE RETAIN  
ORIGINAL SUBMISSION  
DATE

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
13 MAY 24 AM 11:32

Pure Adrenaline Wellness Club Inc.

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

P13000038741

(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:

Sabala Yoga 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)

1232 Hypoluxo Road  
Lantana FL 33462

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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

N/A

1232 Hypoluxo Road

(Florida street address)

New Registered Office Address:

Lantana

(City)

Florida

33462

(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.

N/A

Signature of New Registered Agent, if changing

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 = Chief Executive 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:

☒ Change      PT      John Doe  
  
☒ Remove      V      Mike Jones  
  
☒ Add      SV      Sally Smith

Type of Action  
(Check One)

Title

Name

Address

1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	N/A	N/A	N/A
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	N/A	N/A	N/A
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	N/A	N/A	
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	N/A	N/A	N/A
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	N/A	N/A	N/A
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	N/A	N/A	N/A

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

N/A

**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)

N/A

The date of each amendment(s) adoption: 5/23/2013

Effective date if applicable: \_\_\_\_\_  
(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 N/A."  
(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 5/23/2013  
Signature Audrey Maselli  
(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)

Audrey Maselli  
(Typed or printed name of person signing)  
President  
(Title of person signing)