## P13000068480

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SECRETARY OF STATE

C. LEWIS

Dec 3, 2013

EXAMINER



November 19, 2013

BARBARA BESU / ALLIANCE OUTSOURCE SERVICES INC 1015 SW 13 STREET MIAMI, FL 33129

SUBJECT: CRISTIE'S FITNESS FUEL NUTRITION CORP.

Ref. Number: P13000068480

We have received your document for CRISTIE'S FITNESS FUEL NUTRITION CORP. and your check(s) totaling \$53.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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.

Carolyn Lewis Regulatory Specialist II

Letter Number: 713A00026752

## <u>COVER LETTER</u>

T0: Amendment Section
Division of Corporations

NAME OF CORPORATION	CDISTIE'S EIT	TNIESS ELIEL NI	LITDIT	ION COPP
		INESS FUEL IN	UINII	ION CORP.
DOCUMENT NUMBER: P1	3000068480			
The enclosed Articles of America	dment and fee are su	bmitted for filing.		
Please return all correspondence	e concerning this ma	tter to the following:		
BARB	ARA BESU			
		Name of Contact	Person	
ALLIA	NCE OUTSOUP	RCE SERVICES	INC	
		Firm/ Compa	any	
1015 \$	S.W. 13 STREE	Τ		
		Address		
MIAMI	, FL 33129			
		City/ State and Zi	ip Code	
ALLIANCE	PARALEGALS®	PHUSHMAIL.C	ОМ	
<del></del> Е-п	ail address: (to be us	sed for future annual	report no	otification)
For further information concern	ing this matter, pleas	se call:		
ROGER BESU		at (786		239-3098
Name of Contact Person		Aı	rea Code	& Daytime Telephone Number
Enclosed is a check for the follo	owing amount made	payable to the Florida	a Depart	ment of State:
	13.75 Filing Fee & ertificate of Status	□\$43.75 Filing Fe Certified Copy (Additional copy 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

13 NOV 14 AM 8: 12

## CRISTIE'S FITNESS FUEL NUTRITION CORP.

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

(Document Number of Corporation (if known)  Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amerits Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  CRAZY FOX INC.  The name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevi "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co.". A professional corporation name must contain 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)  1015 S.W. 13 STREET  MIAMI, FLORIDA 33129	the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendmen Incorporation:  Ing name, enter the new name of the corporation:  OX INC.  In the new distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation c," or Co," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the red," "professional association," or the abbreviation "P.A."  In principal office address, if applicable:  Indicate address MUST BE A STREET ADDRESS  MIAMI, FLORIDA 33129  In the registered agent and/or registered office address in Florida, enter the name of the ered agent and/or the new registered office address:
A. If amending name, enter the new name of the corporation:  CRAZY FOX INC.  The 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 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  MIAMI, FLORIDA 33129  C. Enter new mailing address, if applicable:	Incorporation:  Ing name, enter the new name of the corporation:  DX INC.  In new distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation or, " or Co," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the red," "professional association," or the abbreviation "P.A."  In principal office address, if applicable: ince address MUST BE A STREET ADDRESS MUST BE A STREET ADDRESS MIAMI, FLORIDA 33129  In mailing address, if applicable: address MAY BE A POST OFFICE BOX)  In the registered agent and/or registered office address in Florida, enter the name of the ered agent and/or the new registered office address:  In the registered Agent Alliance Outsource Services Inc.  1015 S.W. 13 STREET  ALLiance Outsource Services Inc.  1015 S.W. 13 STREET
CRAZY FOX INC.  The 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 word "chartered," "professional association," or the abbreviation "P.A."  3. Enter new principal office address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  MIAMI, FLORIDA 33129  C. Enter new mailing address, if applicable:  1015 S.W. 13 STREET  MIAMI, FLORIDA 33129	DX INC.  The new e distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "c.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the red," "professional association," or the abbreviation "P.A."  In principal office address, if applicable: address MUST BE A STREET ADDRESS)  We mailing address, if applicable: MIAMI, FLORIDA 33129  We mailing address, if applicable: MIAMI, FLORIDA 33129  The new distinguishable and contain the word "corporation," or the abbreviation "P.A."  In principal office address, if applicable: MIAMI, FLORIDA 33129  The new distinguishable and sociation, "or the abbreviation," or "Co". A professional corporation name must contain the red, "Incorporated" or the abbreviation "P.A."  The new distinguishable and contain the word "corporation," or "incorporated" or the abbreviation "P.A."  The new distinguishable and contain the word "corporation," or "the abbreviation," or "the abbreviation "P.A."  To 15 S.W. 13 STREET  MIAMI, FLORIDA 33129  The new distinguishable and contain the abbreviation "P.A."  The new distinguishable and contain the event must contain the red, "or "the abbreviation "P.A."  The new distinguishable and contain the abbreviation, "or "the abbreviation," or "Co". A professional corporation name must contain the red, "or "the abbreviation "P.A."  The new distinguishable and contain the abbreviation "P.A."  The new distinguishable and contain the red, "or "the abbreviation "P.A."  The new distinguishable and contain the red, "or "the abbreviation "P.A."  The new distinguishable and contain the red, "or "the abbreviation "P.A."  The new distinguishable and contain the red, "or "the abbreviation "P.A."  The new distinguishable and contain the red, "or "the abbreviation "P.A."  The new distinguishable and contain the red, "or "the abbreviation "P.A."  The new distinguishable and contain the red, "or "the abbreviation "P.A."  The new distinguishable and contain the red, "or "the abbreviati
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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 word "chartered," "professional association," or the abbreviation "P.A."  3. Enter new principal office address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  MIAMI, FLORIDA 33129  C. Enter new mailing address, if applicable:  1015 S.W. 13 STREET  MIAMI, FLORIDA 33129	distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation c.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the red," "professional association," or the abbreviation "P.A."  In principal office address, if applicable:  Tice address MUST BE A STREET ADDRESS)  Wind mailing address, if applicable:  Address MAY BE A POST OFFICE BOX)  In the registered agent and/or registered office address in Florida, enter the name of the level agent and/or the new registered office address:  A Col New Registered Agent  ALLIANCE OUTSOURCE SERVICES INC  1015 S.W. 13 STREET
(Principal office address MUST BE A STREET ADDRESS)  MIAMI, FLORIDA 33129  C. Enter new mailing address, if applicable:	MIAMI, FLORIDA 33129  Miamiling address, if applicable: Address MAYBE A POST OFFICE BOX)  Miamiling address if applicable: MIAMI, FLORIDA 33129  Miamiling address in Florida, enter the name of the dered agent and/or registered office address:  MIAMI, FLORIDA 33129
MIAMI, FLORIDA 33129  C. Enter new mailing address, if applicable:	MIAMI, FLORIDA 33129  Miamiling address, if applicable: address MAYBE A POST OFFICE BOX)  Miamiling address, if applicable: MIAMI, FLORIDA 33129  Miamiling address in Florida, enter the name of the ered agent and/or registered office address:  MIAMI, FLORIDA 33129
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  1015 S.W. 13 STREET	MIAMI, FLORIDA 33129  Ing the registered agent and/or registered office address in Florida, enter the name of the ered agent and/or the new registered office address:  In of New Registered Agent  ALLIANCE OUTSOURCE SERVICES INC  1015 S.W. 13 STREET
	MIAMI, FLORIDA 33129  Ing the registered agent and/or registered office address in Florida, enter the name of the ered agent and/or the new registered office address:  In of New Registered Agent ALLIANCE OUTSOURCE SERVICES INCE  1015 S.W. 13 STREET
	ng the registered agent and/or registered office address in Florida, enter the name of the ered agent and/or the new registered office address:  If of New Registered Agent ALLIANCE OUTSOURCE SERVICES INC  1015 S.W. 13 STREET
MIAMI, FLORIDA 33129	ered agent and/or the new registered office address:  of New Registered Agent  1015 S.W. 13 STREET
). If amending the registered agent and/or registered office address in Florida, enter the name of the new registered office address:	1015 S.W. 13 STREET
Name of New Registered Agent ALLIANCE OUTSOURCE SERVICES INC	
1015 S.W. 13 STREET	(Florida street address)
(Florida street address)	
New Registered Office Address: MIAMI , Florida 33129	Registered Office Address MIAMI , Florida 33129
(City) (Zip Code)	(Uity) (Zip Code)

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:

X_Change	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u> s
1) Change	VTD	ANTHONY J. CARBONE	5600 SUNSET DRIVE
Add			MIAMI, FL 33143
Remove		·	
2) Change	S	CRISTIE BESU	31 S.E. 5 STREET # 3615
Add			MIAMI, FL 33131
Remove			
3) Change	·		
Add			
Remove			
4) Change	<del></del>		
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Remove			
5) Change			
Add			
Remove			
6) Change			
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Attach additional sl	ling additional Art heets, if necessary).	(Be specific)	gets) nere:		
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If an amendment p provisions for imp (if not applicat	rovides for an exch lementing the ame ble, indicate N/A)	nange, reclassific endment if not co	ation, or cancellati ntained in the ame	on of issued sha ndment itself:	res <u>,</u>
					·
		·		<u></u>	

The date of each amendment(s) adoption:	Approprian the
date this document was signed.	ANDVED
Effective date if applicable:	" FILED
(no more than 90 days after amendment file date) -	MOV 14
MECA	ETAO. AM 8: 12
Adoption of Amendment(s) (CHECK ONE)	MSSS STATE
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.	MOV 14 AM 8: 12 ETARY OF STATE ORIOA
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)	
(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	
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)	
appointed riducially by that riducially)	
CRISTIE BESU (1/08/	
(Typed or printed name of person signing)	
DIRECTOR W.	
(Title of person signing)	