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JAN 1 2 2015 C. CARROTHERS

COVER LETTER

TO: Amendment Section

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Division of Corporations	
NAME OF CORPORATION: The Body Club Miami IN DOCUMENT NUMBER: P140000 98115	K
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Terry Ellott Gr. Name of Contact Person 114 Biscayne Blud Trx. Firm/ Company 11098 Biscayne Blud # 301 Address Miami, FL 33161 City/ State and Zip Code 114 biscayne Inc O anal, con E-mail address: (to be used for future about report notification)	
For further information concerning this matter, please call:	
Sterria Elliott at (NSG) 577-8693 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:	
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)	
Mailing Address Street Address	

Amendment Section
Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Articles of Amendment

,			Articles of Incorp	oration					
	△		of						
The	Boda	Club	Miami	Inc.				_	
(<u>Nan</u>	ne of Corporation	n as currently f	iled with the Flori	da Dept. of State)				
- P14	<u>0000</u>	8115						•	
	(Docu	ment Number of	Corporation (if kn	own)					
ursuant to the prov s Articles of Incorp		507.1006, Flo r id	a Statutes, this <i>Flo</i>	ida Profit Corpoi	ration adop	ts the fo	llowin	g amen	dment(s)
. If amending na	me, enter the nev	v name of the c	orporation:						
The	Body	Mouni	Inc.					The	new
ame must be disti Corp.," "Inc.," or vord "chartered," "	Co.," or the de	signation "Corp	o," "Inc," or "Co"	. A professional	incorporation	ed"or n name	the a	bbrevia contair	ition i the
. Enter new princ	cipal office addre	ess, if applicabl	e :				1 (3 0	COTE BASE	
Principal office ad							34		•
			-			<u>g</u> it.	ਨ੍ਹ	معومة -	
			-			D-		-	
C. Enter new mai (Mailing addres	ling address, if a s <u>MAY BE A PO</u>		<u>)X</u>) _		 -		•	-	
			-			<u>.</u>		-	
			•					-	
). If amending the new registered	e registered agen agent and/or the			<u>in Florida, enter</u>	the name	of the			
Name of No	ew Registered Ago	ent	- 14 						
			(Florida street d	address)					
			,	,	P11 1 -				
<u>New Kegist</u>	ered Office Addre	<u>255</u> :	(City)	,	Florida	(Zip Co	ode)	-	
New Registered Ac	ant's Signature	if changing Re	nistered Agent:						
hereby accept the	appointment as re	n Glanging Ke gistered agent.	I am familiar with	and accept the ob	oligations o	f the pos	sition.		

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:				
X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change		_		
Add Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		<u>-</u>
Add				<u> </u>
Remove				

Atta	ach additional sheets, if necessary	v). (Be speci	fic)			
						
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<u>If a</u>	n amendment provides for an e ovisions for implementing the a	xchange, recla	assification, or	r cancellation o	f issued shares,	
pro	(if not applicable, indicate N/A	<u> </u>	not contained	in the amenun	ient usen.	
			· ·	<u> </u>		
						<u> </u>
					 -	
						

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
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)	
(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 12/15/14 Signature Muett L	
Signature Muett by	
(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)	
Terry Elliott Sr. (Typed or printed name of person signing)	_
Owner (Title of person signing)	