P14000102527

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TO: Amendment Section Division of Corporations

	RATION: YOGA FAC		SS, INC.	_	
DOCUMENT NUMI	BER: P1400010252			_	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	spondence concerning this ma	tter to the following:			
	Barry L. Haley, R	egistered Agent			
		Name of Contact Person	1		
	Malin Haley DiMaggio & Bowen, P.A.				
		Firm/ Company			
	1936 S. Andrews	Avenue			
		Address			
	Fort Lauderdale,	FL 33316		≥ 5 G	ñ
		City/ State and Zip Code	e		
blh	@mhdpatents.cor	m			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	<u> </u>	sed for future annual report	notification)		70 i
For further information	n concerning this matter, pleas	se call:		ر درد د به د روحه	1: 23
Barry L. Hale	ey	at (954	763-3303	•	
Name o	of Contact Person		de & Daytime Telephone N	lumber	
Enclosed is a check for	r the following amount made	payable to the Florida Depa	ertment 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)		
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section of Corporations Building xecutive Center Circle ussee, FL 32301		

Articles of Amendment to **Articles of Incorporation**

YOGA FACTORY & FITNESS, INC.

(Name of Corporation as currently filed with the Florida Dept. of State) P14000102527

(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:

N/A	
	"corporation," "company," or "incorporated" or the a "Inc," or "Co". A professional corporation name must bbreviation "P.A."
	N/A
Enter new principal office address, if applicables brincipal office address MUST BE A STREET ADD	
Enter new mailing address, if applicable:	N/A
)
(Mailing address MAY BE A POST OFFICE BOX)
(Mailing address MAY BE A POST OFFICE BO) If amending the registered agent and/or register	d office address in Florida, enter the name of the
(Mailing address MAY BE A POST OFFICE BO) If amending the registered agent and/or register new registered agent and/or the new registered agent.	d office address in Florida, enter the name of the
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Mailing address MAY BE A POST OFFICE BOX	d office address in Florida, enter the name of the
(Mailing address MAY BE A POST OFFICE BO) If amending the registered agent and/or registernew registered agent and/or the new registered of NI/A	d office address in Florida, enter the name of the fice address:

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.

X Change	<u>PT</u>	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>Addres</u> s
1) Change	PD	Lori J. Scott	15481 S.W. 12th Street
Add			Suite 300
Remove			Sunrise, FL 33323
2) Change			
Add		-	
Remove			
$\overline{}$			
3) Change	***		
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

(Attac	ending or adding additional Articles, enter change(s) here: h additional sheets, if necessary). (Be specific)
N/A	
man man	
prov	amendment provides for an exchange, reclassification, or cancellation of issued shares, risions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
,	

The date of each amendment(s) ad date this document was signed.	loption:	, if other than the
Effective date <u>if applicable</u> :	IMMEDIATELY	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will partment of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ado by the shareholders was/were sur	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast t	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/were ado action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated6	118/2015	25 JE T
Signature	18th Holy	
	irector, president or other officer – if directors or officers have not been (1), by an incorporator – if in the hands of a receiver, trustee, or other court	70 TT
	ed fiduciary by that fiduciary)	1 22
	BARRY L HA	HEY
•	(Typed or printed name of person signing)	
	DiRECTOR	
•	(Title of person signing)	