

P98000101305

THE LAW OFFICES OF

JOHN BRADLEY AND ASSOCIATES, P.A.

1215 EAST BROWARD BOULEVARD, SUITE 200
FORT LAUDERDALE, FLORIDA 33301

JOHN F. BRADLEY

(954) 523-6160

VIA FEDERAL EXPRESS

January 5, 1999

Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

300002731893--
-01/06/99--01052--008
*****35.00 *****35.00

Re: Franchised Bodycare Services, Inc.

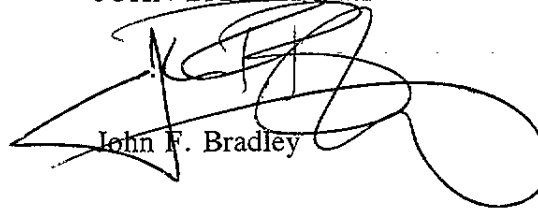
Dear Sirs,

Please find enclosed Articles of Amendment to Articles of Incorporation for Franchised Bodycare Services, Inc., together with a check in the amount of \$35.00 representing your fee. Please process the same as soon as possible and return copies to this office by Federal Express via the prepaid mailing materials enclosed herewith.

If you have any questions, please feel free to contact this office. Thanking you for your attention to this matter, I am,

Sincerely yours,

JOHN BRADLEY AND ASSOCIATES, P.A.


John F. Bradley

JFB:br

Encs.

cc: Charles Strout Davis

FILED
99 JAN -6 AM 8:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N.C.
1-13-99
CC

**ARTICLES OF AMENDMENT TO
THE ARTICLES OF INCORPORATION
OF
FRANCHISED BODYCARE SERVICES, INC.**

FILED
99 JAN -6 AM 8:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of Section 607.1006 of the Florida Statutes, this Florida profit corporation adopts the following Articles of Amendment to its Articles of Incorporation.

ARTICLE I is amended to change the name of the corporation and shall read as follows:

**ARTICLE I
NAME**

The name of the Corporation is **STROUT-DAVIS ENTERPRISES, INC.** The address for the principal office of this corporation shall be #1 Las Olas Circle Suite #801, Fort Lauderdale, Florida 33316.

ARTICLE I was amended on the 5th day of January, 1999.

The amendment was unanimously approved by all directors and shareholders. The number of votes cast for amendment was sufficient for approval.

Signed this 5th day of January, 1999.


Charles Strout Davis, Director

**STATE OF FLORIDA
COUNTY OF BROWARD**

I HEREBY CERTIFY that on this day before me, an officer duly qualified to take acknowledgments, personally appeared Charles Strout Davis

1. { X } to me personally known to be the person described herein and who executed the foregoing instrument, and acknowledged under oath that he executed the same or

2. { } who produced identification in the form of _____, and acknowledged _____ under oath before me that he executed the same.

WITNESS my hand and official seal in the County and State aforesaid this 5th day of January, 1999.

Shalee M. Lindey
Notary Public

Shalee M. Lindey
(Type/print Name of Notary)
My Commission Expires:



Shalee M. Lindey
MY COMMISSION # CC652745 EXPIRES
June 3, 2001
BONDED THRU TROY FAIR INSURANCE, INC.