that my name appears above, or on an attachment with all other like empowered. 03/25/2020

CFO

SIGNATURE: SETH KAYE

Electronic Signature of Signing Authorized Person(s) Detail

3161 WEST MCNAB ROAD POMPANO BEACH. FL 33069 US

Entity Name: QUICK WEIGHT LOSS CENTERS, LLC

Current Principal Place of Business:

FEI Number: 81-3340027

Current Mailing Address:

3161 WEST MCNAB ROAD POMPANO BEACH. FL 33069

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

| Title | CFO | Title | CEO |
|-----------------|-----------------------|-----------------|-----------------------|
| Name | KAYE, SETH | Name | HOPKINS, DARREN |
| Address | 3161 WEST MCNAB ROAD | Address | 3161 WEST MCNAB ROAD |
| City-State-Zip: | POMANO BEACH FL 33069 | City-State-Zip: | POMANO BEACH FL 33069 |

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and

2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# M1600006039

FILED Mar 25, 2020 Secretary of State 6828072881CC

Certificate of Status Desired: No

Date

Date