

L10000123227

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

G. MCLEOD
APR 11 2011
EXAMINER



700200813307

04/08/11--01040--019 **60.00

FILED
11 APR -8 PM 3:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CrossFit South Beach, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alex Fernandez
Name of Person
CrossFit South Beach
Firm/Company
2555 Collins Ave Unit 600
Address
Miami Beach, FL 33140
City/State and Zip Code
alexefernandez@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alex Fernandez at (**305**) **502-6536**
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

CrossFit South Beach, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 11/30/10 and assigned Florida document number L10000123227.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

CrossFit A1A, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

549 NE 72nd St

(Principal office address MUST BE A STREET ADDRESS)

Miami, FL 33138

Enter new mailing address, if applicable:

549 NE 72nd St

(Mailing address MAY BE A POST OFFICE BOX)

Miami, FL 33138

FILED
11 APR - 8 PM 3:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

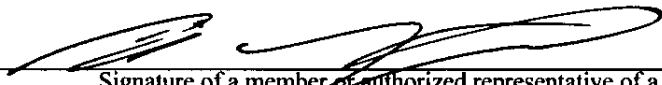
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Daniel Martin	5940 NE 4th Ave Miami, FL 33137	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Dominic Sirianni	12864 Biscayne Blvd #201 North Miami, FL 33181	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Peter Kazanas	5940 NE 4th Ave Miami, FL 33137	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated April 5, 2011



Signature of a member or authorized representative of a member
Alex Fernandez

Typed or printed name of signee