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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1 10/144	**	
1. Na	me of the limited liability company: Beasts & Bur	bells LLC
2. (a)	Beasts & Barbells LLC (b)	Beasts & Barbells LLC
` ,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	•	
	3100 medical way Sebring 1FL 33870	2 1-1-20 22020
	3810	3100 Medical Way Sebring IFL 33870
		1 111 000101919
3.	Date of filing/pointentian in Florida	
J.	Date of filing/registration in Florida 4.	Document number
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dep	e of Steley
		a. of State:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	<del></del>
	•	
	Okeechobee FL 34971	
	Okeechobee ,FL 34971	<u> </u>
<b></b>		
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address	SEC SEC
	and of the state o	AR S HE
	Lisa Smiling	Zu Zu Zu SSE
	NEW Registered Office Address:	
	3100 medical Way	ST ST
	0	RRIDIE 3
	Sebring , FL 3387	<u>70</u>
If the li	mited liability company is not organized under the laws of the Stat	te of Florida, it is hereby confirmed that after
the chai	nge or changes are made, the Florida street address of the registere rill be identical. Or, in the case of a Florida limited liability compa	ed office and the business office of the registered
was/we	re authorized by an affirmative vote of the members of the limited	liability company or as otherwise provided in
the artic	les of organization or the operating agreement of the limited liabi	
X Signati	re of a member or authorized representative of a member	Printed or typed name of signee
I hereb	y accept the appointment as registered agent and agree to act in t	his capacity. I further agree to comply with the
provision the obli	ons of all statutes relative to the proper and complete performance gations of my position as registered agent as provided for in Chap ly reflect a change in the registered office address, I hereby confi	e of mŷ duties, ánd I am familiar with and accept oter 605, F.S. Or, if this document is being filed
to mere notified	ly reflect a change in the reğistered office address, I hereby confit in writing of this change.	rm that the limited liability company has been
	Muliet	
Signatur	e of Registered Agent	

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida

1. N	ame of the limited liability company: Beusts	& Bur	bells	LLC		
2. (a)	Beasts & Barbells LLC	_ (b)		Beasts à		
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		M	failing address of lin (Note: MAY BE P	OST OF	FICE BOX)
	3100 medical way			3100 M	cdice	of way
	3100 medical Way Sebring 1FL 33870			3100 M Sebring	IFL	33870 C
	10/25/14		L	ر ۱4000 اد		
3.	Date of filing/registration in Florida	4.		Document numb		······································
5. (a)		EL 11 B				
	Registered Agent and Registered Office shown on the records of the New 22nd Terr.	e Fiorida i Je	pt. or State	:		
	Registered Office Address (MUST RE FLORIDA STREET A)	DDRESS)				
	Okechobec					
	Okeechobee ,FL	3497	Ψ	TAI	20	
(h)				ECRE LAH	2015 SEP	<b>"T</b> ]
(b)	Enter name of NEW Registered Agent and/or NEW Registered (	office addres	<u></u>	TAR IASS	P 2u	
	hisa Smiling			TARY OF STATE IASSEE, FLORIDA	ד ס	
	NEW Registered Office Address:			STAT	<del>t.</del>	
	3100 medical Way			DFi A	<u>u</u>	
	Sebring , FL	338	70_			
the chagent was/w	limited liability company is not organized under the laws ange or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the li	he register pility comp the limite	ed office cany, it is d liability	and the business hereby confirmed company or as	s office ed that	of the registered the change(s)
X			Do	nou M.W	11des	
I here provis the ob to mer notifie	ture of a member of authorized representative of a member  by accept the appointment as registered agent and agre  lions of all statutes relative to the proper and complete p  ligations of my position as registered agent as provided  rely reflect a change in the registered office address, I he  d in writing of this change.	e to act in performand for in Cha ereby conf	this capa ce of my a pter 605 irm that i	Printed or typed nancity. I further a duties, and I am j. F.S. Or, if this he limited liabili	gree to	comply with the