

L18000252717

Florida Department of State
Division of Corporations
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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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NUTRIFIT-ZONE LLC

Certificate of Status	0
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Page Count	02
Estimated Charge	\$25.00

AL

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

H18000326799 3

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

FIRST: The name of the limited liability company is: NUTRIFIT-ZONE LLC

SECOND: The Florida Document number of the limited liability company is: L18000252717

THIRD: Document to be corrected is: ARTICLES OF ORGANIZATION

CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT

Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

ARTICLE III AND ARTICLE IV INCORRECTLY LIST THE NAME AS ALESSANDRA LADISERNIA. ARTICLE III AND ARTICLE IV SHOULD CORRECTLY LIST THE NAME AS ALESSANDRA IADISERNIA.

OR

Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

[Blank lines for signature correction details]

OR

The electronic transmission of the record was defective.

Signature of Authorized Representative: Alessandra J Date: NOVEMBER 09, 2018

Signature of new registered agent, if applicable :(NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation).

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 605, 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.

Registered Agent's Signature: Alessandra J

Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)

H18000326799 3