

#L13000130622

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

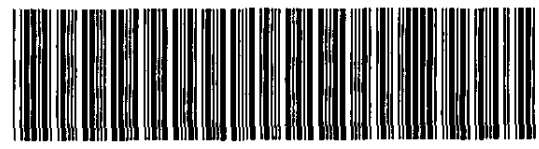
(Business Entity Name)

(Document Number)

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2015 JAN 28 PM 2:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALLY  
EXAMINER  
FEB - 6 2015

**TO: Registration Section  
Division of Corporations**

**SUBJECT: FREESTYLE-FIGHT 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:

**JOZSEF VANYOLOS**

Name of Person

**FREESTYLE-FIGHT LLC**

Firm/Company

**1022 PIPERS CAY DR**

Address

**WEST PALM BEACH / FL / 33415-4007**

City/State and Zip Code

**jozsefvanyolos73@gmail.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**JOZSEF VANYOLOS**

**516 523-1045**

at ( )

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

FREESTYLE-FIGHT LLC

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

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TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 09/16/2013 and assigned  
Florida document number L13000130622

This amendment is submitted to amend the following:

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

NONE APPLICABLE

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:

1022 PIPERS CAY DR

(Principal office address MUST BE A STREET ADDRESS)

WEST PALM BEACH FL 33415-4007

Enter new mailing address, if applicable:

1022 PIPERS CAY DR

(Mailing address MAY BE A POST OFFICE BOX)

WEST PALM BEACH FL 33415-4007

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:

JOZSEF VANYOLOS

New Registered Office Address:

1022 PIPERS CAY DR

*Enter Florida street address*

WEST PALM BEACH

Florida 33415-4007

*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 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.*

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	ZOLTAN FONAI	826 PIPERS CAY DRIVE	<input type="checkbox"/> Add
		WEST PALM BEACH, FL 33415	<input checked="" type="checkbox"/> Remove
N/A	N/A	N/A	<input type="checkbox"/> Add
		N/A	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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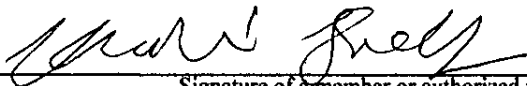
D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

N/A

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 21ST OF JANUARY, 2015



Signature of a member or authorized representative of a member

**JOZSEF VANYOLOS**

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2015 JAN 28 PM 2:01  
STATE TOLSON  
TALLAHASSEE, FLORIDA

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