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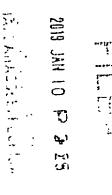
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PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	

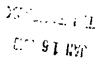
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COVER LETTER

TO: Registration Se- Division of Cor			
SUBJECT: Apex N	lutrition & Fitness, LLC Name of Limi	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Elisabeth Hilt		
		Name of Person	
		Firm/Company	
	27840 Whales Street	Apt. 203	
	•	Address	
	Wesley Chapel, FL. 33	3544	
	, <u>, , , , , , , , , , , , , , , , , , </u>	City/State and Zip Code	
	ehilt1995@gmail.com		
	E-mail address: (1	to be used for future annual report notifi	cation)
For further information co	oncerning this matter, please ca	ali:	
Elisabeth Hilt		at (850) 292-2438	
Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a check for th	ne 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:

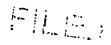
TO:

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



2019 JAN 10 P 2 25 Apex Nutrition & Fitness, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) Indiana and with the man The Articles of Organization for this Limited Liability Company were filed on December 4, 2018 and assigned Florida document number <u>L</u>18000279448 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Level Up Nutrition, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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

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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person, being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Adrian Sanchez	2230 Marsh View Drive Apt. 205	Add
		Wesley Chapel, FL. 33544	Remove
			Change
 			Add
			□ Remove
			Change
			
			Remove
		.	Change
			□ Add
			🗅 Remove
			Change
		 	☐ Remove
			Change
			🗖 Add
			Remove
			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
E. Effective date, if other than the date of filing:
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.
Dated January 7 2019 Signature of a member or authorized representative of a member
Elisabeth Hilt
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00