## L22 000 281 205

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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Was Bad Ass Groove Goddass, LLC -NOW ELEUS WORK
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:
Michelle LeMay Name of Person  ELEUS WORKOUTS
Firm/Company
2352 FENTON AUE
CLERMONT FL 34711  City/State and Zip Code  DJMEESHEL@ GMAIL COM  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Michelle Lettay at (310) 488-8293  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \$\Bigcup \$55.00 Filing Fee & \$\Bigcup \$60.00 Filing Fee.\$  Certificate of Status \$\Bigcup \$\text{cadditional copy is enclosed}\$  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303

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

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ARTICLES OF O	RGANIZATION  Application State of the second
OF	See Some See See
V.	
Dad Dag Google	C CODDICES DAG P.
Daa 1755 Okabu	E GOVDESS, L'ELL 1/30
(Name of the Limited Liability Compan (A Florida Limited Li	ability Company)
	11-10
The Articles of Organization for this Limited Liability Company v	vere filed on $6/24/022$ and assigned
Florida document number <u>600389836986</u> .	
L22000281205	
This amendment is submitted to amend the following:	
A TREE OF THE CONTRACT OF THE	San annual annual transport
A. If amending name, enter the new name of the limited liabil	ny company nere:
ELEUS WORKOUTS.	LLC
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC" or the abbreviation "LLC."
	2352 FENTON AUE
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	CLERMONT, FL 34711
Enter new mailing address, if applicable:	
•	
(Mailing address MAY BE A POST OFFICE BOX)	
•	
B. If amending the registered agent and/or registered office ad	ddress on our records, enter the name of the new registered
agent and/or the new registered office address here:	
Much	volla la Mari
Name of New Registered Agent:	nelle LeMay
New Registered Office Address: 235	2 FENTON AVE
regulation strategies.	Enter Florida street address
CLER	mait 34711
CLER	TYDN   Florida

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

Thereby 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.

Cuy

Changing Registered Agent, Signature of New Registered Agent

Zip Code

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>	Address	Type of Action
	VERONICA RAMIREZ	2352 Fenton Auc	□Add
		CLERMONT, FL 34711	<b>K</b> Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
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			□Remove
			□Change

If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an ef Note:	ive date, if other than the date of filing:
cord is t	
Dated	<u>September 28. 2022.</u>
	September 8 . 2022.  Mulle Le Manager of a member of signed.  Typed or printed name of signed.
	Michelle 10 May
	Typed or printed name of signer

Filing Fee: \$25.00