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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : AUTHORIZATION : COST LIMIT : \$ 35.000 ORDER DATE : ORDER TIME : 10:13 AM ORDER NO. : -009 CUSTOMER NO: CHANGE OF AGENT NAME: ADVANTAGE SPORT & FITNESS, INC. PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: __ CERTIFIED COPY XX PLAIN STAMPED COPY CONTACT PERSON: Eyliena Baker EXAMINER'S INITIALS:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a corporation	17.0502 , 607.1508 , or 617.1508 , Florida S organized under the laws of the State of $\frac{1}{2}$ registered agent, or both, in the State of F	NY
1. The name of t	he corporation: ADVANTAGE SPO	DRT & FITNESS, INC.	
2. The principal	office address: 2255 N. TRIPHAM	MER RD. ITHACA, NY 14850	
3. The mailing a	ddress (if different):		
4. Date of incorp	ooration/qualification: 08/28/2013	Document number: F130000	03743
	street address of the current regist tment of State: (If resigned, enter r	ered agent and registered office on file wiresigned)	th the
	C T CORPORATION SYSTEM		
	1200 SOUTH PINE ISLAND RO	AD	2024 Tàli
	PLANTATION	FL 33324	JA.
6. The name and (if changed):	street address of the new registere Corporation Service Company	ed agent (if changed) and /or registered off	Co 🗫
			MII: LI
	1201 Hays Street	P.O. Box NOT acceptable	
	Tallahassee	FL 32301	
The street addre	ss of its registered office and the be identical.	street address of the business office of its	s registered agent,
Such change wa authorized by th	is authorized by resolution duly a de board, or the corporation has be	dopted by its board of directors or by an een notified in writing of the change.	officer so
/S/ John M. Pfuntner		John M. Pfuntner	Vice President
•	e of an officer or director	Printed or typed name and tit	le
I further agrée t of my duties, an document is bei corporation has	o comply with the provisions of a	ent and agree to act in this capacity. Il statutes relative to the proper and com he obligation of my position as registered e in the registered office address, I hereb hange.	plete performance I agent. Or, if this y confirm that the
Ву: У	mee tokuble	01/25/2024	
Sign	nature of Registered Agent \	Date -	
If signing on be	half of an entity:		
	rby, Asst. Vice President		

* * * FILING FEE: \$35.00 * * *