

L0400002925

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet**368737**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000230627 3)))



H110002306273ABOV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 012450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

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

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
FITSOURCE SUNSET LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

RECEIVED

11 SEP 21 AM 9:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDASECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 SEP 21 AM 8:29

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

T. HAMPTON
SEP 21 2011**EXAMINER**<https://efile.sunbiz.org/scripts/efilcovr.exe>

6/21/2011

COVER LETTER

H11000230627

TO: Registration Section
Division of Corporations

SUBJECT: Fitsource Sunset 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:

Alan K. Marcus

Name of Person

Marcus Law Center, LLC

Firm/Company

2600 Douglas Road, Suite 1111

Address

Coral Gables, FL 33134

City/State and Zip Code

amarcus@marcuslawcenter.com

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

For further information concerning this matter, please call:

Yamin Meneses

Name of Person

at (305)

401-9669

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/COURTIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

H11000230627

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

2011 SEP 21 AM 8:29

Fitsource Sunset, LLC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

The Articles of Organization for this Limited Liability Company were filed on 12/23/04 and assigned
Florida document number LO4000092925.

This amendment is submitted to amend the following:

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

Elements Fitness of Sunset LLC

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:

8758 SW 72 Street

(Principal office address MUST BE A STREET ADDRESS)

Miami, FL 33173

Enter new mailing address, if applicable:

3505 W. 20 Avenue

(Mailing address MAY BE A POST OFFICE BOX)

Hialeah, FL 33012

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

Florida

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 608, 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

Page 1 of 2

H 1100023067+

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

Title	Name	Address	Type of Action
MGR	CGA Empire Holdings	12218 SW 132 Ct Miami, FL 33186	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	TALS International, LLC	8758 SW 72 Street Miami, FL 33173	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated _____

Signature of a member or authorized representative of a member

Typed or printed name of signer

Page 2 of 2

Filing Fee: \$25.00

FILED
2011 SEP 21 AM 8:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H 11000230627