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EXAMINER



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TO:	Registration Sec Division of Corp		*	ing .
	cr: PF Flori	da LLC		Ð
5050			ted Liability Company)	
				chang
The end	closed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	rame.
Please r	eturn all correspo	ndence concerning this matter	to the following:	Name
			ŭ	•
		Heather L. Robinson		
		Tiodalor E. Itooliloon	(Name of Person)	· · · · · · · · · · · · · · · · · · ·
		Planet Fitness	PF Florida, LL (Firm/Company)	<u>C</u>
		l	(Firm/Company)	
		10301 Southern Blvd.		
			(Address)	
		Bount Bolm Booch El 2	2411	
		Royal Palm Beach FL, 3	(City/State and Zip Code)	·
For furt	ther information co	oncerning this matter, please ca	ali:	•
Hoathe	ar Dobinson		at (561) 670-4366	
Heather Robinson (Name of Person)		f Person)	at (SOI) 070-4300 (Area Code & Daytime Te	elephone Number)
Enclose	ed is a check for th	e following amount:		
	.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)
	Registra Divisio P.O. Bo	ation Section of Corporations ox 6327 ssee, FL 32314	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns · Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PF Florida LLC			
(<u>Name of the Limited Liabili</u> (A Florida	ity Company as it now appears on our records.) a Limited Liability Company)		
(Control of the Control of the Contr	,		
The Articles of Organization for this Limited Liability	Company were filed on 03/25/05	and assigned	
Florida document number L05000030183	·	,	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	mited liability company here:		
PF Royal Palm LLC			
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Company," the designation	n "LLC" or the abbreviation	
Enter new principal offices address, if applicable:		860 SEAL	
(Principal office address MUST BE A STREET ADI	DRESS)	A OC	
•		= = = = = = = = = = = = = = = = = = =	
		355	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		2	
		Q	
·			
B. If amending the registered agent and/or reg		er the name of the nev	
registered agent and/or the new registered office ad	<u>ldress here</u> :		
	•		
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 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

<u>le</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
<u> </u>			Remove
			Add
			Remove
			Add
			- Damoua
		•	
			Add Remove
If amend	ing any other information, enter c	hange(s) here: (Attach additional shee	ts, if necessary.)
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	ary 24		
ed Februa			

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Filing Fee: \$25.00