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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2012 AUG 31 AM 8:42

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J. SAULSBERRY  
EXAMINER  
SEP 4 2012

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 3D Group Fitness L.C.  
Name of Limited Liability Company

The enclosed Articles of Amendment and fec(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Tennille Weems

Name of Person

3D Group Fitness L.C.

Firm/Company

2932 Stonegate Lane

Address

Middleburg, FL 32068

City/State and Zip Code

+g.weems@hotmail.com

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

For further information concerning this matter, please call:

Tennille Weems

Name of Person

at (904) 710-5442

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/COURIER ADDRESS:**

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

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TALLAHASSEE, FLORIDA

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

3D Group Fitness L.C.

(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 June 28, 2006 and assigned Florida document number L06000066215.

This amendment is submitted to amend the following:

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

Momentum Fitness Delivered L.L.C.

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:**

(Principal office address MUST BE A STREET ADDRESS)

Ø change

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

Ø change

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TALLAHASSEE, FLORIDA

**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:

Tennille Weems

New Registered Office Address:

2932 Stonegate Lane

Enter Florida street address

Middleburg

Florida

32068  
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.

T. Weems

If Changing Registered Agent, Signature of New Registered Agent

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Ginny Jenkins	1759 Eagle Watch Dr. Fleming Island, FL, 32003	<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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Ø change

Dated

8/31/12

*Tennille Weems*

Signature of a member or authorized representative of a member

Tennille Weems

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA

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