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| Certified Copies | _ Certificates | of Status |
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SECRETARY OF STATE
AND AHASSEE, FLORIDA

MAR 2 4 2013 T. **HAMPTON**

COVER LETTER

| TO: Registration Section Division of Corporations | |
|--|--|
| SUBJECT: Genesis Fitness 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: | |
| Tennille Weems | |
| · | |
| Genesis Fitness | |
| . Fim/Company | |
| 1782 Foggy Day Drive | |
| O J Address! | |
| middleburg, FL 32068 | |
| Chylotada and any code | |
| E-mail address: (to be used for future annual report notification) | _ |
| For further information concerning this matter, please call: | |
| Tennille Weems at (904) 710-5442 Name of Person Area Code Daytime Telephone Num | ber |
| Enclosed is a check for the following amount: | |
| Certificate of Status Certified Copy Certificate of Status (additional copy is enclosed) Certificate of Status | Filing Fee, icate of Status & led Copy mal 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



March 6, 2014

TENNILLE WEEMS 1782 FOGGY DAY DR MIDDLEBURG, FL 32068

SUBJECT: MOMENTUM > FITNESS DELIVERED L.L.C.

Ref. Number: L06000066215

We have received your document for MOMENTUM > FITNESS DELIVERED L.L.C. and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton Regulatory Specialist III

Letter Number: 214A00004955

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Momentum > Fitness Deliv (Name of the Limited Liability Compan (A Florida Limited Li | v as it now appears on our records.) ability Company) |
|---|--|
| The Articles of Organization for this Limited Liability Company v Florida document numberLOGOOGG6215 | were filed on 9/29/66 and assigned |
| This amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the limited liabil | ity company here: |
| The new name must be distinguishable and end with the words "Limited Liabil | Fitness and Nutrition LLC ity 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) | 1782 Foggy Day Drive Middleburg, FL 32068 |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 1782 Foggy Day Drive Middleburg, FL 32068 |
| B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here: | |
| Name of New Registered Agent: New Registered Office Address: | 2014 HAR SECRET TALLLAHA |
| New Registered Office Address. | Enter Florida street address , Florida Zip Code |
| New Registered Agent's Signature, if changing Registered Agent: | 0.75 - 1.75 - 1. |
| I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office a company has been notified in writing of this change | performance of my duties, and I am familiar with and covided for in Chapter 605, F.S. Or, if this document is |

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member <u>Title</u> **Address Type of Action** Name MGR Ginny Jenkins _□ Remove ☐ Add □ Remove ☐ Remove □ Add ☐ Remove _D Add _□ Remove

| If ame | ending any other information, enter change(s) here: (Attach additional sheets, if necessary.) |
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| | ive date, if other than the date of filing: (optional) ective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after |
| the date | e this document is filed by the Florida Department of State) |
| Dated | March 3, 2014. |
| | |
| | Signature of a member or authorized representative of a member |
| | Cinners of a manch in an authorized announce for a figure and an |
| | Signature of a memoer or authorized representative of a memoer |
| | Tennille weems Typed or printed name of signee |

Page 3 of 3

Filing Fee: \$25.00

SECRETARY OF STATE

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