L07000013005

(Re	equestor's Name)		
(Ad	ldress)	,	
(Ad	ldress)		
(Cit	ty/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nar	ne)	
, tou	Siness Chury Mar	ne,	
(Document Number)			
Certified Copies	Certificates	s of Status	
Special Instructions to	Filing Officer:		

Office Use Only



700173034327

03/25/10--01010--009 **30.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

S. HAWKES

APR 6 2010

EXAMINER

S. HAWKES

MAR 2 6 2010

EXAMINER





March 26, 2010

GLORIA ORTIZ 3705 NW 115TH AVE BAY #1 DORAL, FL 33178

SUBJECT: POWERTUMBLE GYMNASTICS AND SPORT CENTE, LLC

Ref. Number: L07000013005

We have received your document for POWERTUMBLE GYMNASTICS AND SPORT CENTE, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6955.

Letter Number: 210A00007501

Suzanne Hawkes Regulatory Specialist II

www.sunbiz.org

TO:	Registration Section
,	Division of Corporations

SUBJECT: POWERTUMBLE GYMNASTICS AND SPORTS CENTE. L

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:

Name of Person

POWERTUMBLE GYMNASTICS AND SPORTS CENTE, L

Firm/Company

3705 NW 115th AVE BAY #1

Address

DORAL, FL 33178

City/State and Zip Code

gloriaeortiz@msn.com

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

For further information concerning this matter, please call:

GLORIA E. ORTIZ

709-3655

Name of Person . .

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

▼\$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

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

POWERTUMBLE GYMNASTICS AND SPORTS CENTE, LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

	were filed on 02/05/2007 and assigned
Florida document numberL07000013005	B. T.
	盖 山下
	SA P F
This amendment is submitted to amend the following:	Fig. 2
A. If amending name, enter the new name of the limited liab	ility company here:
POWERTUMBLE GYMNASTICS	AND SPORTS CENTER, LLC
The new name must be distinguishable and end with the words "Limi	ited Liability Company," the designation "LLC" or the abbreviation
"LLC." Service of the	
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	
Trining in the mineral most bis 1818 and 1818	
San Carlotte and the second of the second	
Enter new mailing address, if applicable:	. ————————————————————————————————————
Mailing address MAY BE A POST OFFICE BOX)	·
B. If amending the registered agent and/or registered of	fice address on our records, enter the name of the new
registered agent and/or the new registered office address her	
Name of New Registered Agent:	
Name of New Registerou Argent.	
New Registered Office Address:	
	Enter Florida street address
	Florida
The second of th	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	City Zip Code
	City Zip Code
hereby accept the appointment as registered agent and agr he provisions of all statutes relative to the proper and comp	City Zip Code ee to act in this capacity. I further agree to comply with olete performance of my duties, and I am familiar with and
hereby accept the appointment as registered agent and agr he provisions of all statutes relative to the proper and comp accept the obligations of my position as registered agent as p	City Zip Code ree to act in this capacity. I further agree to comply with relete performance of my duties, and I am familiar with and provided for in Chapter 608, F.S. Or, if this document is
hereby accept the appointment as registered agent and agr he provisions of all statutes relative to the proper and comp accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office	City Zip Code ree to act in this capacity. I further agree to comply with relete performance of my duties, and I am familiar with and provided for in Chapter 608, F.S. Or, if this document is
I hereby accept the appointment as registered agent and agr the provisions of all statutes relative to the proper and comp accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office	City Zip Code ree to act in this capacity. I further agree to comply with relete performance of my duties, and I am familiar with and rovorded for in Chapter 608, F.S. Or, if this document is
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agrithe provisions of all statutes relative to the proper and compaccept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	City Zip Code ree to act in this capacity. I further agree to comply with slete performance of my duties, and I am familiar with and provided for in Chapter 608, F.S. Or, if this document is address, I hereby confirm that the limited liability
l hereby accept the appointment as registered agent and agr the provisions of all statutes relative to the proper and comp accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	City Zip Code ree to act in this capacity. I further agree to comply with elete performance of my duties, and I am familiar with and provided for in Chapter 608, F.S. Or, if this document is e address, I hereby confirm that the limited liability nging Registered Agent, Signature of New Registered Agent

MGRM	Manager = Managing Member	
<u>Title</u>	Name Address	Type of Action
		3
		And
		SP S
•		る Add
		Remove
		Add
	and the control of th	Remove
		-
		∏Add
·		Remove
, ··		
		.□Add
		Remove
		• • • • • • • • • • • • • • • • • • • •
		Production of the state of the
		∏Add ∏Remove
D. If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
	· · · · · · · · · · · · · · · · · · ·	
		-
•		
Dated		
Dated	aleena & Outy	
Dated	Signature of a member or authorized representative of a member	
Dated	Gloria E ORTIZ	
Dated		