

207000062869

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

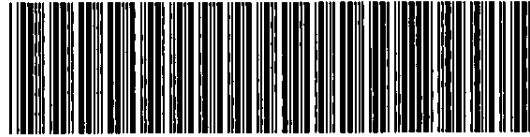
Special Instructions to Filing Officer:

**A. LUNT**

FEB - 8 2011

**EXAMINER**

Office Use Only



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02/06/12--01006--021 \*\*25.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2012 FEB - 6 PM 4: 06

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: FGG 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:

GREGORY MICHAEL FRAUNHOFER SR.  
Name of Person

ANYTIME FITNESS OF WESTCHASE  
Firm/Company

9602 LINDBAUGH AVE  
Address

TAMPA FLORIDA 33626  
City/State and Zip Code

Tampa FL3 @ ANYTIME FITNESS.COM  
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

GREG FRAUNHOFER (734) 777-1166  
OR  
GENE HALE at (813) 792-2900  
Name of Person 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

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FGG LLC

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

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SECRETARY OF STATE  
FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 2-01-12 and assigned  
Florida document number 107000062869.

This amendment is submitted to amend the following:

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

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)

GREGORY M. FRAUNHOFER Sr.  
1523 SWISSETSPIRE DR  
TRINITY, FL. 34655

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**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:

SAME

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.

SAME  
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:

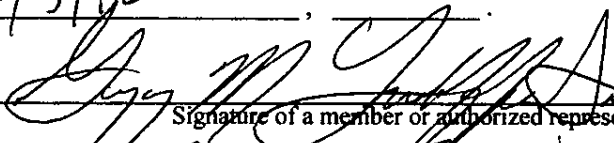
MGR = Manager  
MGRM = Managing Member

Title	Name	Address	Type of Action
MGRM owner	Gregory M. Fraunhoffer Sr.	1523 Sweetspine Trinity, FL 34655	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	MALCOLM E. HALE	3628 Westchester Dr Holiday, FL 34691 US	<input type="checkbox"/> Add <input checked="" 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

2/3/12



Signature of a member or authorized representative of a member

Gregory M. Fraunhoffer Sr.

Typed or printed name of signee

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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