L07000116246

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EXAMINER

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SECRETARY OF STATE

COVER LETTER

TO:	Registration Sect Division of Corpo					
SUBJECT: SUNSHINE FITNESS WINTER PARK, LLC (Name of Limited Liability Company)						
Please	return all correspond	dence concerning this matter	to the following:			
		TODD D. WALKER				
			(Name of Person)			
		TODD D. WALKER, I	P.A. (Firm/Company)			
		P.O. BOX 623275	(Address)			
		OVIEDO, FL 32762	· · · · · · · · · · · · · · · · · · ·			
			(City/State and Zip Code)			
For further information concerning this matter, please call:						
TODD D. WALKER (Name of Person)		at (407) 977-1667 (Area Code & Daytime	Telephone Number)			
	V		,	•		
Enclose	ed 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

SUNSHINE FITNESS WINTER PARK, LLC

(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 NOVEMBER 16, 2007 and assigned Florida document number L07000116246

This amendment is submitted to amend the following:

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

SUNSHINE FITNESS METROWEST, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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:

New Registered Office Address:

(Enter Florida street address)

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.

(City)

(If Changing Registered Agent, Signature of New Registered Agent)

A CONTROL OF CONTROL

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 = M MGRM =	lanager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			AddRemove
			Add Remove
			Add Remove
			Add Remove
D. If ame	nding any other information, enter chang	e(s) here: (Attach additional sheets, if nec	eessary.)
-			
– – Dated JAI	NUARY 22nd , 2008		20 Tin
Daieu <u>vi II</u>	Thathoh	or authorized representative of a member	ZOOR JAN 25
	TODD D. WALKER AGENT		<u> </u>
	Туред	or printed name of signee Page 2 of 2	N 4:3

Filing Fee: \$25.00