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(Address) (City/State/Zip/Phone #)		
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COVER LETTER

Division of Corporations					
SUBJECT: Workout, LLC					
	Name of Limited Liability Company				
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Offi	ice Change and fee(s) are submitted for filing.				
Please return all correspondence concerning the	is matter to the following:				
Matthew Ornstein					
Name of Person					
Workout, LLC					
Firm/Company					
98 Orange Street					
Address					
Neptune Beach, FL 32266					
City/State and Zip Code					
ornsteincapital@aol.com					
E-mail address: (to be used for future ann	ual report notification)				
For further information concerning this matter,	please call:				
Matt Ornstein	404 401-3505 at ()				
Name of Person	Area Code & Daytime Telephone Number				
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enclosed is a check for the following	amount:				
□ \$25 Filing Fee	☑ \$55 Filing Fee & Certified Copy				

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. N	ame of the limited liability company: Workout, LL	_C	
2. (a)	98 Orange Street	(b) 98 Oran	nge Street
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Neptune Beach, FL 32266	Neptune	Beach, FL 32266
	6/12/2009	L0900005	57750
3.5. (a)	Date of filing/registration in Florida Ornstein, Matthew	4.	Document number
J. (u)	Registered Agent and Registered Office shown on the records 3815 Wahoo Drive	of the Florida Dept. of State	e: 3.5 2.7
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
	St. Augustine, I	_{-L} 32084	TO MAR 31 PH 2: 28
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u> 98 Orange Street <u>NEW Registered Office Address:</u>	red Office address:	
	Neptune Beach	_{FL} 32266	_
the cha agent was/w the art	limited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the membersicles of organization or the operating agreement of the companion of the operating agreement of the companion of the operating agreement of the operating agr	of the registered office liability company, it is s of the limited liabilit	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in npany. stein
_	ature of a member or authorized representative of a member		Printed or typed name of signee
the obli to mer notifie	by accept the appointment as registered agent and a ions of all statutes relative to the proper and comple ligations of my position as registered agent as provicely reflect a change in the registered office address, d in writing of this change.	gree to act in this cap le performance of my ded for in Chapter 605 I hereby confirm that	acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
Signatu	ire of Registered Agent		