

L09000085418

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2011 OCT 17 PM 4:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. HAMPTON

OCT 18 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AMERICAN FITNESS 24/7
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:

KATHERINE HOGAN
Name of Person

American Fitness 24/7
Firm/Company

6668 THOMASVILLE Rd suite 7
Address

Tallahassee FL 32312
City/State and Zip Code

americanfitness247@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kathy Hogan at 850 545 2000
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**

FILED

2011 OCT 17 PM 4:01

AMERICAN FITNESS 24/7, LLC

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

CLERK OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 9-2-2009 and assigned
Florida document number L09000085418

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)

SAME

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

SAME

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

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.

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

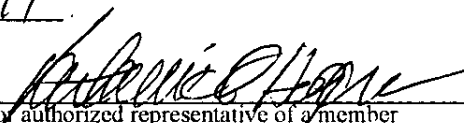
Title	Name	Address	Type of Action
MGRM	KATHERINE D. HOGAN	SAME	<input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove SAME
MGRM	JAYE L. DANFORTH	SAME	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	JAYE L. DANFORTH	SAME	<input type="checkbox"/> 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

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

THERE ARE TO BE TWO (2) MANAGING
MEMBERS NOW, NOT JUST ONE.
KATHERINE D. HOGAN AND

JAYE L. DANFORTH. BEFORE JAYE WAS ONLY A
MEMBER, SHE TOO SHOULD BE MGRM

Dated 10-12, 2011


Signature of a member or authorized representative of a member
KATHERINE D. HOGAN
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

CALL ME WITH QUESTIONS 545-2000

KATHERINE HOGAN

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TALLAHASSEE, FLORIDA