

L11 000043550

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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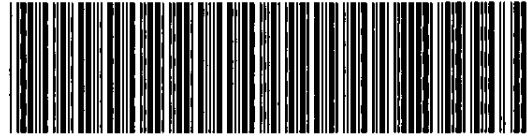
(Business Entity Name)

(Document Number)

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2012 JAN - 6 PM 1:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE
JAN - 9 2012
EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Freedom Fit Healthcare 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:

Kyle S. Conard

Name of Person

Freedom Fit Healthcare LLC

Firm/Company

9225 Ulmerton Rd. Suite S

Address

Largo FL 33771

City/State and Zip Code

ann@freedomfithealthcare.com

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

For further information concerning this matter, please call:

Kyle S. Conard

Name of Person

at (**727**)

216-6688

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

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TALLAHASSEE, FLORIDA

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

(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 04/12/2011 and assigned
Florida document number L11000043550.

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)

9225 Ulmerton Rd Suite S

Largo Fl. 33771

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

9225 Ulmerton Rd Suite S

Largo Fl. 33771

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TALLAHASSEE, FLORIDA

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:

Kyle S. Conard

New Registered Office Address:

9225 Ulmerton Rd Suite S

Enter Florida street address

Largo

, Florida

33771

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

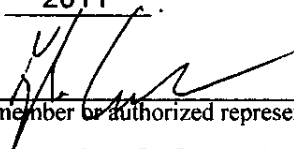
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Mgr	Scott W. Conard	7850 Oliver Rd Seminole fl. 33777	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
Member	Patrick G. Klaskow	15695 George Blvd Clearwater Fl. 33760	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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			<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.)*

Scott W. Conard resigns as managing member, President and registered agent

Patrick G. Klaskow resigns as member and Vice-President of sales & marketing

Dated December 27th, 2011


Signature of a member or authorized representative of a member

Kyle S. Conard

Typed or printed name of signee