100066858

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
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(Document Number)					
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Account#: I20000000088

Date: March 28, 2022	Account#. 120000000000
Name: GREG PINTACUDA	
Reference #:1628841	
Entity Name: FITTER & FASTER TOUR LLC	_
Articles of Incorporation/Authorization to Transact Busine	ess
☐ Amendment	
✓ Change of Agent	
Reinstatement	
Conversion	
☐ Merger	
☐ Dissolution/Withdrawal	
☐ Fictitous Name	
Other	
·	
•	
Authorized Amount: \$25	
Signature:	



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☐ Dissolution/Withdrawal	
☐ Fictitous Name	
Other	<u></u>
Authorized Amount: \$25	
Signature:	

+1.212.947.7200

-44 (0)20.3786.1090

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.	Na	une of the limited liability company:	Fitter & Faster Tour LLC	
2.	(a)	2275 Research Blvd.	(b)	2275 Research Blvd.
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(°,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Suite 500		Suite 500
		Rockville, MD 20850	_	Rockville, MD 20850
		June 8, 2011		L11000066858
3.		Date of filing/registration in Florida	4.	Document number
5.	(a)	David Arluck		
		Registered Agent and Registered Office shown on the records of	the Florida	Dept, of State:
		2275 Research Blvd.		
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		2
		Suite 500		
		Rockville FL	20	0850
				10
	(b)	COGENCY GLOBAL INC.		
		Enter name of NEW Registered Agent and/or NEW Registered Office address:		dress:
		115 North Calhoun Street, Suit	te 4	<u> </u>
		NEW Registered Office Address:		
		Tallahaana	20	2301
		Tallahassee , FL imited liability company is not organized under the lay	vs of the	State of Florida, it is hereby confirmed that after
ag wa	ent v is/w	inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited like creathforized by an affirmative vote of the members of icles of organization or the operating agreement of the	ability co of the lim	ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in
_	· · · · · · · · · · · · · · ·	Atthe Thopa AUTHORITAN		STEPHEN E. LOPEZ Printed or typed name of signee
	-	nute of symember or authorized representative of a member nep		
pr the to	ovisi 2 obi mer	hy accept the appointment as registered agent and agrious of all statutes relative to the proper and complete ligations of my position as registered agent as provide elv reflect a change in the registered affice address. It is mariting affice address of the property of the change of the property of the change of the property of the	performa d för in C	ance of my duties, and Lam familiar with and accept Chapter 605, F.S. Or, if this document is being filed

Signature of Registered Agent

Sheila Carroll, Assistant Secretary

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00