# #1-120000004191

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
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VALLAHASSEE, FLORIC

K.SALY EXAMINER JAN -2 2013

#### **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: Fitness Finance Partners LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

## Kim Stephens

Name of Person

Firm/Company

10 12th Ave East

Address

Palmetto, FI 34221

City/State and Zip Code

kimstephens327@yahoo.com

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

For further information concerning this matter, please call:

### Kim Stephens

...941

713-9520

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

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

Pursuant to the provisions of sections 608.416 or 608.508, 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	ame of the limited liability company: Fitness Finance Partn	ers LLC	
2. (a)	Principal office address of limited liability compar (Note: MUST BE STREET ADDRESS)	y: 102 12th Ave East Palmetto FL 34221	<b>?</b>
(b)	Mailing address of limited liability company:	102 12th Ave East	28
( <u>Note: MAY BE POST OFFICE BOX</u> )		Palmetto, FL 34221	100
01/10/20	012	L12000004191	05. 6
3. Da	ate of filing/registration in Florida	4. Document number	\$P00
5. (a	) Registered Agent and Registered Office shown on	the records of the Florida D	ept. of State:
	Registered Agent:	Kim Stephens	
Registered Office Address:	Registered Office Address:	102 12th Ave East	
		Palmetto, FL 34221	
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> :	CW Registered Office addre	ess:
	<del></del>		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)		720 Whitfield Ave Sarasota	
	in our burners of the second of		,FL <u>3424</u> 3
confir and the liabilithe me the op	limited liability company is not organized under the rmed that after the change or changes are made, the line business office of the registered agent will be identity company, it is hereby confirmed that the change embers of the limited liability company or as otherworsting agreement of the limited liability company.  The of a member of authorized representative of a member	Florida street address of the r	registered office
	eiders, MGRM	· <b>—</b>	
I here compl and I Chap addre	dor typed name of signee eby accept the appointment as registered agent and ly with the provisions of all statutes relative to the pl am familiar with and accept the obligations of my p ter 608, F.S. Or, if this document is being filed to m ss, I hereby confirm that the limited liability compainted Registered Agent	agree to act in this capacity. roper and complete perform osition as registered agent a erely reflect a change in the ny has been notified in writir	I further agree to ance of my duties, is provided for in registered office ig of this change.

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