000074716

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JEL 20 PH 5-20

S. PRATHER

COVER LETTER

Division of Corporations			
SUBJECT: Gymtodo Fit Name of Lim	NESS SOLUTIONS, LLC ited 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:			
Jorge Manzanille	i		
Gymtodo Fitness Solutions, LLC. Firm/Company			
1504 BAY Rd #1907			
MIANI BEACH FL 33139 City/State and Zip Code			
JE-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Jorge Manzanileat (305) 310 2208 Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section Division of Corporations		
Division of Corporations Clifton Building	P.O. Box 6327		
2661 Executive Center Circle Tallahassee, Florida 32301	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.

I IOTTUU	·	
I. Na	me of the limited liability company:	Solutions
2. (a)	(b)	
	Principal office address of limited liability company: Mailir	g address of limited liability company: te: MAY BE POST OFFICE BOX)
	1504 BAY ROAD #1907	
	MIAMI BEACH FL 33139	
		00074716
3.		ument number
5. (a)	United States Corporation Acents, I.	NC.
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	Thic
	SHEILA DANG, US COMP. AGENTS,	
	Registered Office Address [MOST BE FLORIDA STREET ADDRESS]	
	13302 WINDING OAK COURTA	ਲੋ
	TAMPA .FL 33612	ç :
	4-1-10	. 20
(b)	SONGE MANZANISIA	-0 -0 -0
	Enter name of NEW Registered Agent and/or NEW Registered Office address:	∞
	1504 BAY ROAD #1907	: 20
	NEW Registered Office Address:	_
	MIAMI BEACH FL 33139	
ICV I.		is in bound of an order of the second
the chai	mited liability company is not organized under the laws of the State of Florida age or changes are made, the Florida street address of the registered office and	the business office of the registered
	ill be identical. Or, in the case of a Florida limited liability company, it is here authorized by an affirmative vote of the members of the limited liability cor	
	eles of organization or the operating agreement of the limited liability company	v. Tarana arang aran
	ire of a member or authorized representative of a member Prin	MANZANIIA ted or typed name of signee
-		
provisid the obli to mere	y accept the appointment as registered agent and agree to act in this capacity ons of all statutes relative to the proper and complete performance of my dutie gations of my position as registered agent as provided for in Chapter 605. F.S by reflect a change in the registered office address. I hereby confirm that the lift in writing of this change.	i juriner agree to comply with the s, and I am familiar with and accept . Or, if this document is being filed mited liability company has been

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

Signature of Registered Agent