L12000103709

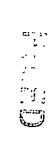
(Requestor's Name)								
(Address)								
(Address)								
(City/State/Zip/Phone #)								
PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
Certified Copies Certificates of Status								
Special Instructions to Filing Officer:								





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06/24/19--01024--027 **25.00



R. WHITE 'JUL 0 5 2019

COVER LETTER

TO:	Registration Section Division of Corporations							
SUBJI	ULTIMATE SPORTS INSTITUTE & FITNESS CENTER, LLC							
5000	Name of Limited Liability Company							
Dear S	ir or Madam:							
The en	closed Registered Agent/Registered Off	ice Change a	nd fee(s) are submitted for filing.					
Please	return all correspondence concerning th	is matter to tl	he following:					
JULIE	E CAMUNAS							
	Name of Person							
ULTII	MATE SPORTS INSTITUTE & FI	TNESS CE	NTE					
	Firm/Company							
1440	N PARK DR							
	Address							
WES	TON, FL 33326							
	City/State and Zip Code							
USIW	/ESTON@GMAIL.COM							
E	-mail address: (to be used for future ann	ual report no	otification)					
For fu	rther information concerning this matter.	, please call:						
JULIE	CAMUNAS	954 at (217-2004					
-	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		1 1 1	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314					
	Enclosed is a check for the following							
	2 \$25 Filing Fee	<u> </u>	\$55 Filing Fee & Certified Copy					
INHSI	8 (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.

1.	vame of the limited hability company:	PORTS		IE & FITNESS (ENIE	R, LLC
2. (a		(b				
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			ailing address of limited (Note: MAY BE POST		
	WESTON, FL 33326			I, FL 33326		
	 	<u> </u>				
	04/26/2019		L1200010	3709		
3.	Date of filing/registration in Florida	4 .	I	Document number		
5. (a	DBLOCK, INC.					
J. (c	Registered Agent and Registered Office shown on the records of					
					201	
	Registered Office Address (MUST BE FLORIDA STREET.	2		 Kair 610	er. <u>T</u> aJ	
	1440 N PARK DR			•	11 24	,
	WESTON , FL	33326		·		(")
(b	DBLOCK CONSULTING INC.				P :: γ:	
(0	Enter name of NEW Registered Agent and/or NEW Registered	 .	32			
	1440 N PARK DR					
	NEW Registered Office Address:					
	WESTON					
	WESTON	33326				
the cl agent was/v	limited liability company is not organized under the landange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	the reginability confiderate from the firm of the limited from the limited	stered office a empany, it is lited liability iability comp	and the business of hereby confirmed to company or as other cany.	fice of the corwise p	he registered :hange(s)
Sign	nature of a member or authorized representative of a member		ا المركب	Printed or typed name of	of signee	···
I her provi the or to me notifi	ehv accept the appointment as registered agent and agistions of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address, I ed in writing of this change.	ree to act perform d for in (hereby co	in this capac	city. I further agree	e to com	iply with the h and accep s being filed has been
Signa	ture of Registered Agent					