

L12000 119 843

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

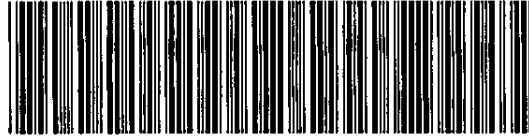
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500272143085

04/24/15--01038--010 **125.00

2015 APR 24 PM 12:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

MAY 05 2015
J. HARRIS

NELSON SLOSBERGAS, P.A.

1110 BRICKELL AVENUE

SUITE 310

MIAMI, FLORIDA 33131

E-MAIL ADDRESS nelson@miami-intl-law.com

WEB PAGE www.miami-intl-law.com

NELSON SLOSBERGAS
ATTORNEY AND CIVIL LAW NOTARY

(305) 374-0030
FAX (305) 374-2855

April 23, 2015

Secretary of State
Division of Corporation
2661 Executive Center Circle
Tallahassee, Florida 32301

VIA Federal Express

RE: Amendments

Dear Sir or Madam,

Enclosed please find the Articles of Amendment to Articles of Organization for the following companies

- Tampa Fitness Partners II LLC
- Tampa Fitness Partners III LLC
- Tampa Fitness Partners IV LLC
- Tampa Fitness Partners V LLC
- Tampa Fitness Partners VI LLC

Additionally, please find our check in the amount of \$125.00 representing the filing fee for the five amendments to be filed. I kindly ask that you proceed with filing of the same. Once file, please return the confirmation to our office, in the self addressed stamped envelope enclosed.

Thank you for your attention to this matter.

Very truly yours,


Teresita Bregola Escudero, FRP
Corporate Paralegal

[Direct E-Mail: teri@miami-intl-law.com]

Enclosures (as noted)

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

TAMPA FITNESSPARTNERS V LLC

(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 09/19/2012 and assigned
Florida document number L12000119843.

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)

1110 BRICKELL AVE, SUITE 310

MIAMI, FL 33131

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

NS CORPORATE SERVICES INC

New Registered Office Address:

1110 BRICKELL AVE, SUITE 310

Enter Florida street address

MIAMI

City

Florida 33131

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 605, 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 Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Tampa Fitness Holdings LI	3411 Silverside Road	<input type="checkbox"/> Add
		Rodney Bldg 104	<input checked="" type="checkbox"/> Remove
		Wilmington, DE	
MGR	Donald Allen, Jr.	3314 Henderson Boulevard	<input checked="" type="checkbox"/> Add
		Suite 100M	<input type="checkbox"/> Remove
		Tampa, FL 33609	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

FILED
20 APR 24 PM 12:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ **(optional)**

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State.)

Dated _____

Signature of a member or authorized representative of a member

Tampa Fitness Holdings, LLC, by Guilarey Ltd., its Member, by Edgard Corona, S

Typed or printed name of signee

FILED
2015 APR 24 PM 12:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA