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(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
EXAMINER  
FEB -6 2013

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: LB Crossfit Wellness Studio LLC**  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Bryan J. Baker**

Name of Person

Firm/Company

**845 Teague Trail**

Address

**Lady Lake, FL 32159**

City/State and Zip Code

**bbaker352@yahoo.com**

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

For further information concerning this matter, please call:

**shannon@shannonbarleypa.com** at **352 748-8000**

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

**(Name of the Limited Liability Company as it now appears on our records.)**  
**(A Florida Limited Liability Company)**

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If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager  
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	LAINE C D'SOUZA	5304 BOWLINE COURT	<input type="checkbox"/> Add
		OXFORD, FL 34484	<input checked="" type="checkbox"/> Remove
MGRM	BRYAN J. BAKER	13876 NE 13TH ST	<input checked="" type="checkbox"/> Add
		OXFORD, FL 34484	<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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

**CHANGING TITLE OF BRYAN J. BAKER TO MGRM**

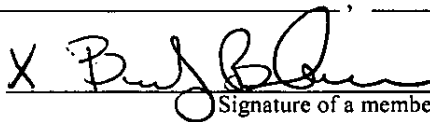
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Dated **JANUARY 29**, **2013**

X 

Signature of a member or authorized representative of a member

\_\_\_\_\_  
Typed or printed name of signee

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**Filing Fee: \$25.00**