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SECRETARY OF STAIL

AUG 1 8 2015 Y SULKER

COVER LETTER

□ \$25 Filing Fee

INHS18 (2/14)

TO: Registration Section Division of Corporations			
SUBJECT: Ultimate Fitness Coaching 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:			
Dagoberto Vila Name of Person			
Utimate Fitness Coading Firm/Company			
3994 Ocean Drive WYW Address			
Vero Beach, Fl 32963 City/State and Zip Code			
E-mail address: (to be used for future aprilar report notification)			
For further information concerning this matter, please call:			
Dagobesto Vilu at (786) 357 - 8289 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:			

□ \$55 Filing Fee & Certified Copy



RECEIVED

15 AUG 13 PM 2: 22

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE Division of Corporations

July 10, 2015

DAGOBERTO VILA 3554 OCEAN DRIVE 104 N VERO BEACH, FL 32963

SUBJECT: ULTIMATE FITNESS COACHING L.L.C.

Ref. Number: L13000008329

We have received your document for ULTIMATE FITNESS COACHING L.L.C. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 315A00014520

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.	Na	me of the limited liability company: Ultimate Fitness Coacting
2.	(a)	495 22nd Place (b) 3554 Ocean Drive
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		I mad it I to
		Dero Beach 7 32960 Worth
		1/16/2013 L1300000 8329
3.		Date of filing/registration in Florida 4. Document number
5.	(a)	Dagoberto Vila
٥,	(4)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
		8343 Chinaberra Doal
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
		Indian Micel Sol-S
		5 A
	(b)	SA CONTRACTOR OF THE CONTRACTO
	` '	Enter name of NEW Registered Agent and/or NEW Registered Office address:
		3554 Ocean Doine 104N
		NEW Registered Office Address:
		3 7 4 1
		Vero Beuch FL 32963
If t	he li	mited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after
the	cha	nge or changes are made, the Florida street address of the registered office and the business office of the registered
wa:	s/we	vill be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) re authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in
the	arti	cles of organization of the operating agreement of the limited liability company.
_	ignat	ure of a prember or authorized representative of a member Printed or typed name of signee
	_	,
pro the	visi	ons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept eations of my nosition as registered agent as provided for in Chapter 605. F.S. Or, if this document is being filed
to i	nere ified	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the consolidations of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept gations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed by reflect a chapter in the registered office address, I hereby confirm that the limited liability company has been in the limited liability liability company has been in the limited liability liab
		Wearful //
Sig	natu	e of Registered Agent