

L13 0000 50359

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

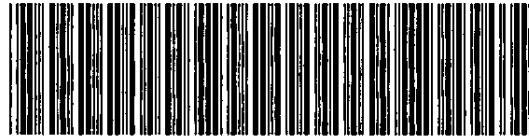
Special Instructions to Filing Officer:

A

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MAY 13 2013

B. KOHR



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FILED
13 MAY 10 PM 1:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: **Elevate Fitness, 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:

Kim M. Floore

Name of Person

Elevate Fitness, LLC

Firm/Company

2935 6th Ave N.

Address

St Petersburg, FL 33713

City/State and Zip Code

kiglo@yahoo.com

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

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13 MAY 10 PM 1:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Kim M. Floore

Name of Person

727 224-5260

at ()

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

Elevate Fitness, LLC

Page 1 of 3

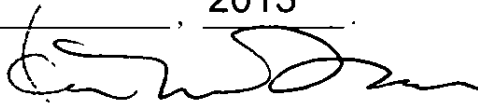
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Namaste Productions, LLC	6001 central ave	<input type="checkbox"/> Add
		St. Petersburg, FL 33710	<input checked="" type="checkbox"/> Remove
MGRM	Jennifer J. Pierson	1114 Farragut Dr. N	<input type="checkbox"/> Add
		St. Petersburg, FL 33710	<input checked="" 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.)*

Dated 9 May, 2013



Signature of a member or authorized representative of a member

Kim M. Floore

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00