# #1 13000054531

(Re	questor's Name)	
(Add	dress)	
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(Cit	y/State/Zip/Phone	e #)
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> K. SALY EXAMINER

MAY -7 2013

### **COVER LETTER**

TO:

Registration Section
Division of Corporations

URLECT: ETECH 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:

# MARSHA SIHA

Name of Person

**INCFILE** 

Finn/Company

# 134 VINTAGE PARK BLVD STE A 50

Address

# HOUSTON, TX 77070

City/State and Zip Code

## MARSHA@INCFILE.COM

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

For further information concerning this matter, please call:

MARSHA SIHA

<sub>....</sub>888、462-3453

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)

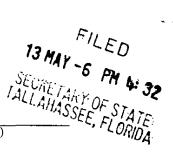
#### MAILING ADDRESS:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



#### **ETECH FITNESS 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 4/15/2013 and assigned	
Florida document number L13000054531		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Company," the designation "LLC" or the abbrevia	 ation
Enter new principal offices address, if applicable:	22050 MARANATHA WAY	
(Principal office address MUST BE A STREET ADDRESS)	LEONARDTOWN, MD 20650	_
Enter new mailing address, if applicable:	22050 MARANATHA WAY	_
(Mailing address MAY BE A POST OFFICE BOX)	LEONARDTOWN, MD 20650	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		new
		_
New Registered Office Address:	Enter Florida street address	_
	, Florida	
	City 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 608, 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 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>	Address	Type of Action
MGRM	GLENN LARSEN	22050 MARANTHA WAY	, ✓ Add
		LEONARDTOWN, MD 20650	Remove
MGRM	GLENN LARSEN	22050 MARANTHA WAY	, Add
		LEONARDTOWN, FL 20650	Remove
			_
			Remove
			Add
			Remove
			Add Remove
			Add

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)						
, <b>'</b>						
Dated APRIL 19	2013					
	Glenn Lauser					
	Signature of a member or authorized representative of a member					
GLENN	LARSEN- MEMBER					

Typed or printed name of signee
Page 3 of 3

Filing Fee: \$25.00