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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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AUG - 9 2013

T CLINE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **CROSSFIT LAKE WORTH 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:

Lauren Truszkowski

Name of Person

Firm/Company

624 Sea Pine Way A1

Address

Greenacres/FL 33415

City/State and Zip Code

lu612@yahoo.com

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

For further information concerning this matter, please call:

Lauren Truszkowski

Name of Person

at () **561 301-0805**

Area Code & Daytime Telephone Number

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TALLAHASSEE, FLORIDA

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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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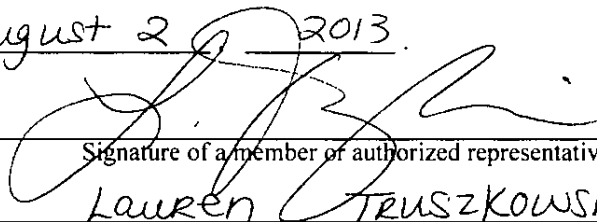
MGR = Manager
MGRM = Managing Member

SECRETARY OF STATE
HALL, ARMS & AMMUNITION

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

Dated August 2, 2013.



Signature of a member or authorized representative of a member

Lauren Truszkowski

Typed or printed name of signee

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Filing Fee: \$25.00

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