

3/22/2017

Division of Corporations

L13000085410

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
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From:

Account Name : LAW OFFICES TONY PORNPRINYA
Account Number : I20010000164
Phone : (305)893-8989
Fax Number : (305)891-7717

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please**

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CROSSFIT UPPER KEYS, LLC**

Certificate of Status	0
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Corporate Filing Menu

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MAR 23 2017

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CROSSFIT UPPER KEYS, 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 06/16/13 and assigned
Florida document number L13000085410

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

ANNA RICHARDS

New Registered Office Address:

171 HOOD AVENUE, UNIT 11

Enter Florida street address

TAVERNIER

Florida 33070

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 605, 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

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	JONATHAN EDMISTON	1112 WATERSTONE PARK CIRC	☐ Add
		HILLSBOROUGH, NC 27278	☒ Remove
			☐ Change
MGR	MELISSA EDMISTON	1112 WATERSTONE PARK CIRC	☐ Add
		HILLSBOROUGH, NC 27278	☒ Remove
			☐ Change
MGR	ANNA RICHARDS	171 HOOD AVENUE, UNIT 11	☒ Add
		TAVERNIER, FL 33070	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

2017 MAR 22 PM 9:10
 TALLAHASSEE, FLORIDA
 SECRETARY OF STATE

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

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TALLAHASSEE, FLORIDA

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E. Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated March 17, 2017

Signature of a member or authorized representative of a member

Anna Richards

Typed or printed name of signee