#13000133206

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I		
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SEGNATARY OF STATE
TALLAHASSEE, FLORIDA

K.SALY EXAMINER OCT 16 2013

COVER LETTER

TO: Registration S Division of Co			
_{ѕивјест:} <u>iHea</u>	rtFitness, LLC		
SUBJEC1:		ed Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Meagan Wel	hle	
		Name of Person	
	iHeartFitnes	s, LLC	
		Firm/Company	
	7042 kendal	l heath way	
		Address	
	land o lakes,	fl 34637	
		City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	iHeartFitness@ho	tmail.com o be used for future annual report notificat	ion
For further information	concerning this matter, please co	·	NII)
Meagan W	'ehle	813 919-948	1
Name	of Person	Area Code & Daytime To	elephone 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)

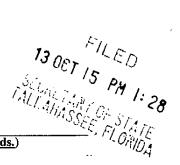
MAILING ADDRESS:

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



iHeartFitness, 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 Lial	bility Company were filed on 9/16/13	and assigned
Florida document number 113000133206		
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	he limited liability company here:	
n/a		
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company," the	designation "LLC" or the abbreviation
Enter new principal offices address, if applical	ole: n/a	
(Principal office address MUST BE A STREET	ADDRESS)	W-244
Enter new mailing address, if applicable:	n/a	
(Mailing address MAY BE A POST OFFICE B	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered offi	•	ords, <u>enter the name of the new</u>
Name of New Registered Agent:	n/a	
New Registered Office Address:		
	Enter Flori	da 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member **Title Name** <u>Address</u> **Type of Action** 7042 kendall Heath Way Meagan Wehle MGR Land O Lakes, FL 34637 7042 Kendall Heath Way Patrick Fletcher MGR land O Lakes, FL 34637 7042 Kendall Heath Way Add Patrick Fletcher MGRM Land O Lakes, FL 34637 Remove

Hemoving Weagan	Wehle" as MGR and switching "Patrick Fletch	er" to MGF
	,	
october 10	2013	
0.000	11,1	
	Signature of a member or authorized representative of a member	per

Page 3 of 3

Filing Fee: \$25.00