

L13000150477

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** High Caliber 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:

Justin Nadal, President

Name of Person

High Caliber Fitness LLC

Firm/Company

502 S Adams St

Address

Beverly Hills, FL 34465

City/State and Zip Code

jnadal14@gmail.com

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Lynne West

Name of Person

at (352) 634-5212

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**

High Caliber 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 October 25, 2013 and signed  
Florida document number L13000150477

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

8303 Crystal Street, Crystal River, FL 34428

**(Principal office address MUST BE A STREET ADDRESS)**

Enter new mailing address, if applicable:

8303 Crystal Street, Crystal River, FL 34428

**(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:

New Registered Office Address:

*Enter Florida street address*

*City*

*, Florida*

*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**

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

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Justin Nadal	502 S Adams St	<input type="checkbox"/> Add
		Beverly Hills, FL 34465	<input type="checkbox"/> Remove
MGR	Donald Miner	9374 N. Citrus Springs Blvd	<input type="checkbox"/> Add
		Citrus Springs, FL 34434	<input type="checkbox"/> Remove
MGR	Lynne West	5681 W Conestoga St	<input checked="" type="checkbox"/> Add
		Beverly Hills, FL 34465	<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

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

Partnership division:

Justin Nadal 34% ownership - President

Donald Miner 33% ownership - Vice President Operations

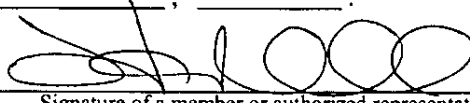
Lynne West 33% ownership - Vice President Marketing & Finance

Any LLC revisions must be approved by all three above

E. Effective date, if other than the date of filing: 3/26/14 (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 3/26/14

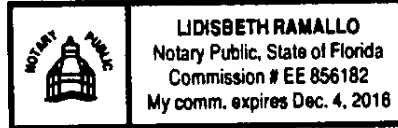


Signature of a member or authorized representative of a member

Justin Nadal, President

Typed or printed name of signee

State of Florida  
County of Citrus



The foregoing instrument acknowledged before me this  
26<sup>th</sup> day of March, 2014, Page 3 of 3 by Justin Nadal, who  
presented valid FL driver's license.  
Filing Fee: \$25.00

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