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T. BROWN

A & N/C

### COVER LETTER

TO:

**Registration Section Division of Corporations** 

Mantaray Crossfit 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:

# Keathel Chauncey, Esq.

## Fresh Legal Perspective, PL

16536 N. Dale Mabry Hwy.

Tampa, FL 33618

City/State and Zip Code

Contact@BLTFL.com

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

For further information concerning this matter, please call:

### Keathel Chauncey

at (813)448-1042

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



# FRESH LEGAL PERSPECTIVE, PL

16536 N. Dale Mabry Highway, Tampa, FL 33618

November 14, 2013

Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

Re: Mantaray Crossfit LLC

Enclosed by find Articles of Amendment for Mantaray Crossfit LLC and check number 1207 for the filing fee.

If you have any questions, please contact me at 813-448-1042 or contact@BLTFL.com.

Regards,

Keathel W. Chauncey, Esq. Fresh Legal Perspective, PL

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

13 NOV 18 PM 4:02

SECRETARY OF STATE
AND FLORIDA

Mantaray Crossfit, LLC

(Name of the Limited Liability Company as it now appears on our records.

(A Florida Limited Liability Company)

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and assigned
designation "LLC" or the abbreviation
. 1
rds, enter the name of the new
da street address
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 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> **Name** <u>Address</u> **Type of Action** Theresa Albors 5971 Brick Court **MGRM** Winter Park, FL 32792 Remove

). If amendii	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
<del></del> .	
ated	vember 8, 2013.
	Hat Maur
_	Signature of a member of authorized representative of a member
	Keathel Chauncey, Esq. on behalf of Rene Albors
_	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00