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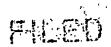
MAY 3 - 0019

T. LEMEUX

COVER LETTER

TO:	Registration Sec Division of Corp					
emb te	Fitspire, LL	C.				
SUBJF	.C.1:	Name of Limit	ed Liabilit	ability Company		
The en	closed Articles of a	Amendment and fee(s) are subn	nitted for	filing.		
Please	return all correspon	ndence concerning this matter t	o the tolk	owing:		
		Victoria McGee				
			Nam	ne of Person		
		Fitspire, LLC.				
		138 17th Ave N	Firn	n/Company		
		138 17th Ave is				
		St. Petersburg, FL 33704		Address		
		toriashleymegee@gmail.com	ı	e and Zip Code		
For fur	ther information or	E-mail address: (u oncerning this matter, please ca		or future annual report not	ification)	
	a McGee	meering and mater, peace or		727 612-3444		
	Name of	Person	at		ne Telephone Number	
Enclos	ed is a check for th	e following amount:				
■ \$23	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Cer	00 Filing Fee & nified Copy itional 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/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL 3	orations Tenter Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Fitspire, LLC.

(Name of the Limited Liability Company as it now appears on of Action (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Con-	pany were filed on 12	1/09/2013 TAKES	Land assigned
Florida document numberL13000169901			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	d liability company h	<u>ere</u> :	
Rowboat Press, LLC			
The new name must be distinguishable and contain the words "Limited	Hiability Company," the	designation "LLC" or the	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES	<u>ss</u>)		
			
Passa and an Oliver address of applicables			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or register		n our records, <u>en</u>	ter the name of the new
registered agent and/or the new registered office addres	<u>s here</u> :		
Name of New Registered Agent:	1.		
New Registered Office Address:			
	Enter Florida street address		
		, Florida	Zip Code
			Zip Code
New Registered Agent's Signature, if changing Registered A	<u>gént:</u>		
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compaccept the obligations of my position as registered agent being filed to merely reflect a change in the registered company has been notified in writing of this change.	plete performance of it as provided for in	f my duties, and Lo Chapter 605, F.S.	am familiar with and Or, if this document is
ī	f Changing Registered A	gent, <u>Signature of Ne</u>	w Registered Agent

	Authorized Person(s) authorized to trom our records:	manage, enter the title, name, an	d address of each person being added
MGR = M AMBR = A	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			Add
			□ Remove
			☐ Change
			Add
			☐ Remove
		_	Change
			Add
			□ Remove
			Change
			Add
			Remove
			☐ Change
			Add
			Remove
			Change
			☐ Remove
			Change

				
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		-		
Sective date, if other than the effective date is listed, the date in this cument's effective date on the	ust be specific and cannot be prior block does not meet the applic	able statutory tiling req	(optional) han 90 days after filing.) Pursuan quirements, this date will not	t to 605.0207 be listed as
record specifies a delaye The 90th day after the re		t an effective time	e, at 12:01 a.m. on the	earlier of
May 13	2019			
Victor	in MCHO			
	Signature of a member or auth	orized representative of a	member	
Victoria McGee				

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Filing Fee: \$25.00