L14000019785

(Requestor's Name)				
(Address)				
(Address)				
(123,333)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Dusiness Estite Nome)				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

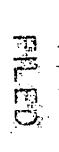
Office Use Only



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SECRETARY OF STATES



COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJI	GA Fitness					
SODJ	i.c.r		ited Liability Company			
		Amendment and fee(s) are sub				
Please	return all correspo	ndence concerning this matter	to the following:			
		Donald E. Keller III				
			Name of Person			
		GA Fitness LLC				
Firm/Company						
3689 Tomlinson St. Address						
						
Bonita Springs, Florida 34134						
		donnie@ioniccrossfit.com	City/State and Zip Code			
		E-mail address: (to be used for future annual report notifi	cation)		
For fu	rther information c	oncerning this matter, please ca	all:			
Donal	d E. Keller III		239 218-4766 at ()			
	Name o	f Person	Area Code Daytime	Telephone Number		
Enclos	sed is a check for th	ne following amount:				
■ \$2	5.00 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



February 14, 2019

DONALD E KELLER III 3689 TOMLINSON ST BONITA SPRINGS, FL 34134

SUBJECT: GA FITNESS LLC Ref. Number: L14000019785

We have received your document for GA FITNESS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please Donald Keller III sign the amendment.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 719A00003253

RECEIVED 199FEB 28 AM 11: 0E

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

GA Fitness LLC

(Name of the Limited Liability Company as it now appears of the Limited Liability Company)

SECRETARY OF STATES

New Registered Office Address:		Enter Florida street addre	
Name of New Registered Agent: New Registered Office Address: Donald E. Kelle 3689 Tomlinson		ı St.	
		er III	
ter new mailing address, if applicable: ailing address MAY BE A POST OFFICE B If amending the registered agent and/ogistered agent and/or the new registered off	or registered of		
		Bonita Springs, Florida 3413;	<u> </u>
<u>incipal office address MUST BE A STREET</u>	<u>"ADDRESS)</u>	Suite 22	<u> </u>
ter new principal offices address, if applicable:		24850 Old 41 Road	
new name must be distinguishable and contain the wo	ords "Limited Liabi	ity Company," the designation "LL	C" or the abbreviation "L.L.C."

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.

Page 1 of 3

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

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Christopher D. Godfrey	5100 Harborage Dr.	
		Fort Myers Florida 33908	
			■ Remove
			☐ Change
MGR	Daniel Arbelaez	11432 Kenley Circle	5
		Orlando Florida 32824	Add
			■ Remove
		 	☐ Change
	 		□ Add
			☐ Remove
			□ Change
			Add
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			□ Remove
			☐ Change

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ective date, if other than t		(optional)	
		to date of filing or more than 90 days after filing able statutory filing requirements, this date	
	Department of State's records,		
record specifies a delay The 90th day after the r		t an effective time, at 12:01 a.m.	on the earlier of:
the John day direct the t	scora is mea.		
February 5	2019		
		<u> </u>	
_	1 amy Elle 10		
	Signature of a moniber or autho		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00