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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

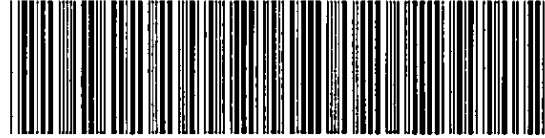
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Champion Fitness LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Chase Knight
Name of Person

Champion Fitness LLC
Firm/Company

353 NE Marion St
Address

Madison, FL 32340
City/State and Zip Code

championfitnessmadison@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Chase Knight at (850) 779-7280
Name of Person Area Code & Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE 2020 FEB 11
Division of Corporations

February 5, 2020

CHASE KNIGHT
353 NE MARION ST
MADISON, FL 32340

SUBJECT: CHAMPION FITNESS, L.L.C.
Ref. Number: L14000033592

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

Only one person can serve as registered agent. Please chose one person to serve.

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.

Rebekah White
Regulatory Specialist II Supervisor

Letter Number: 220A00002636

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR
LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Champion Fitness

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

131 SW Captain Brown Rd

Madison FL 32340

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

353 NE Marion St

Madison, FL 32340

02/26/2014

114000033592

3. Date of filing/registration in Florida

4. Document number

5. (a) Willy & Melissa Gamalero

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

3344 NW Chicken Rd

Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**

Madison, FL 32340

(b) Chase Knight

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

131 SW Captain Brown Rd

NEW Registered Office Address:

Madison, FL 32340

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

William Gamalero
Signature of a member or authorized representative of a member

William Gamalero
Printed or typed name of signee

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.

Chase Knight
Signature of Registered Agent