

Division of Corporations

1/2/2020
L14000052915

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (350) 617 6283

From: Account Name : INCORP SERVICES INC
Account Number : 120120000007
Phone : (702) 866-2500
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC REGISTERED AGENT CHANGE
YOU FIT ENTERPRISES, LLC

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JUL 29 2020

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Estimated Charge	\$25.00

R/A-CH

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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: You Fit Enterprises, LLC

2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 1350 E. NEWPORT CENTER DRIVE SUITE 110 Deerfield Beach, FL 33442 (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 1350 E. NEWPORT CENTER DRIVE SUITE 110 Deerfield Beach, FL 33442

3. Date of filing/registration in Florida: 03/31/2014 4. Document number: L14000052915

5. (a) STROSS, CHRISTY B Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 111 2Nd Avenue Ne Suite 1402 Registered Office Address (MUST BE FLORIDA STREET ADDRESS) St. Petersburg, FL 33701

(b) InCorp Services, Inc. Enter name of NEW Registered Agent and/or NEW Registered Office address: 17888 67th Court North NEW Registered Office Address: Loxahatchee, FL 33470

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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.

Signature of a member or authorized representative of a member: [Signature] David Mayer 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 to the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change. Jackie DeFilippis on behalf of InCorp Services, Inc.

Signature of Registered Agent: Jackie DeFilippis