L14000122335

(Requestor's Name)					
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(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	WAIT	MAIL			
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Certified Copies	_ Certificates	s of Status			
Special Instructions to	Filing Officer:				
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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM

Date: March 2	8, 2022	Account#: I20000000088				
····	Shulman					
Reference #:	1593354					
Entity Name:	SUNSHIN	E FITNESS HOLDINGS, LLC				
Articles of Incorp	oration/Authori:	ation to Transact Business				
Amendment						
✓ Change of Agent		ICCUTES CALL				
Reinstatement	ISSUES? CALL Reinstatement David:					
☐ Conversion 850-270-0082						
Merger						
Dissolution/Witho	drawal					
☐ Fictitious Name						
Other						
Authorized Amount:	\$25.0					
Signature:	David Shulman					

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.

Name of the limited liability company:			SU	SUNSHINE FITNESS HOLDINGS, LLC			
2.	(a)			(h)			
2. (11)		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 4 Liberty Lane West			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
					4 Liberty Lane West		
		Hampton, N.H. 03842		<u> </u>	Hampton, N.H. 03842		
		8/4/2014			L14000122335		
3.		Date of filing/registration in Florida		4.	Document number		
5	(a)	McGuiness, Shar	ne				
٠.	()	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:					
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)						
	1560 N. Orange Ave, Suite 300						
		Winter Park	, FL	32789			
	(b)	COGENCY GLOBAL			2022 HAC 29		
(**)		Enter name of NEW Registered Agent and/or NEW Registered Office address:					
	115 North Calhoun Street, Suite 4			4			
		NEW Registered Office Address:					
		Tallahassee	, FL	32301			
the ag wa	z cha ent w is/we	imited liability company is not organized under nge or changes are made, the Florida street add vill be identical. Or, in the case of a Florida line are authorized by an affirmative vote of the med cles of organization or the operating agreemen	dress of the nited liabil mbers of th	e registered off lity company, i ne limited liab	ice and the business office of the registered t is hereby confirmed that the change(s) lity company or as otherwise provided in		
		/s/ Justin Vartanian ure of a member or authorized representative of a membe			Justin Vartanian Printed or typed name of signee		
$\frac{I}{p_f}$	herel oviși	by accept the appointment as registered agent of ons of all statutes relative to the proper and co	and agree implete pej	to act in this c rformance of n	apacity. I further agree to comply with the ny duties, and I am familiar with and accept		

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.

/s/ Michael Carlisle

Signature of Registered Agent Michael Carlisle, Assistant Secretary