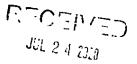
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PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	

Office Use Only



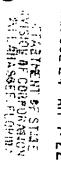
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SEP 1 5 2020

S. YOUNG



## COVER LETTER

TO: Registration Sect Division of Corpo						
DANCEFIT 1	ГАМРА, LLC					
SUBJECT:	na off	11 d Talethilly Com.	• • • • • • • • • • • • • • • • • • • •		<del></del>	
			•	•		
The enclosed Articles of A	mendment and fee(s) are sul	bmitted for filing.				· r · · · r
Please return all correspond	lence concerning this matter	r to the following:				٠.
	JILL BARONE			San Live	od vod	
		Name of Per	son in the son	<u> </u>	y weeks	<b>能</b> 。
. 20	DANCEFIT TAMPA, LL	12 14				
	10716 BEAGLE RUN PL	Firm/Compa		ogs a - ·	The legal	ired ( ) - 1 , 1 }
		Address	Anger and	$\overline{BL} \leftarrow \mathbb{R}^{3}$	J.S. 174 N. 17 11 11	Majorian se <u>jagi</u>
		. Addiess				
	TAMPA, FL 33626				·	
	ID A DONIESSAGO MAIL	City/State and Zi	-	2) \$ \$ \$ \$ \$ \$ \$		· · · · · · · · · · · · · · · · · · ·
	JBARONE226@GMAIL.C	(to be used for future			W MAY PE 1 P	Autor Autoral
For further information cor	cerning this matter, please	•	•			
JILL BARONE	<del>_</del>	o no le stitudo (*			o an leur situ. Local es <u>desta</u>	
Name of F	Person	at ( Area Co	ode Daytin	ne Telephone	Number	
		-	. <del></del>	ar esta	<u>ર્તી પ્રેથમ પ્રેક્સું</u> દાવ	วันมีห <sub>ุ้ง</sub>
Enclosed is a check for the	following amount:			esting.	<u></u>	· •
<b>■ \$25.00</b> Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Fili Certified C	Dopy is enclosed)	Co Co (ac	0.00 Filing Fee, ertificate of Status ertified Copy dditional copy is enclos	
	on the same	A 3	agires agree of the co			
Mailing Address: Registration Se Division of Co P.O. Box 6327 Tallahassee, FI	rporations	T.	egistration Se legistration of Co he Centre of 415 N. Monro	rporations Fallahasse	and Same	
,			allahassee, FI	•		

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DANCEFIT TAMPA, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited L	iability Company)	,	三部 上
The Articles of Organization for this Limited Liability Company	were filed on JA	ANUARY 6, 2015	and assigned
Florida document number L15000002642			7: 22
This amendment is submitted to amend the following:			.7
A. If amending name, enter the new name of the limited liabi	lity company h	ere:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the	designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
			<del></del>
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
, · ·			
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our 1	records, enter the	name of the new regist
agent and of the new registered office address here.			
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flo	rida street address	
		, Florid	la Zip Code
New Registered Agent's Signature, if changing Registered Agent:	City		Zip Code
I hereby accept the appointment as registered agent and agre	o to act in this	canacity I furthe	er garee to comply with
provisions of all statutes relative to the proper and consplete p	performance of	f my duties, and I	am familiar with and

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 contplete 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.

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

MGR =	M	ana	ger		
			_	-	-

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	JILL BARONE	10716 BEAGLE RUN PLACE	□Add
		TAMPA, FL 33626	□Remove
			⊟Change
	<del></del>	·	□Add
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fective date is listed, the date m If the date inserted in this	ne date of filing:  ust be specific and cannot be prior to date of filing block does not meet the applicable statutory Department of State's records.	(optional) or more than 90 days after filing.) Pursuant to 605 filing requirements, this date will not be liste
rd specifies a delayed effect iled.	ive date, but not an effective time, at 12:01 a	n.m. on the earlier of: (b) The 90th day after
Til.	<u>al</u> , <u>aoao</u> .	
- <u>Juu</u>	LII RAIN	U
٠ <u></u>	Signature of a member or authorized represent	native of a member
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