

215000105120

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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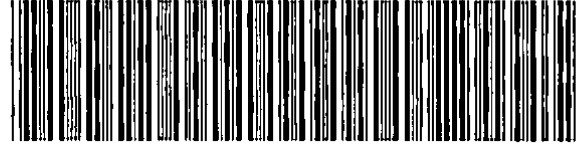
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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CUSTOM FITNESS OF FORT MYERS 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:

**KAREN GOLDBERG**

\_\_\_\_\_  
Name of Person

**CUSTOM FITNESS OF FORT MYERS LLC**

\_\_\_\_\_  
Firm/Company

**2059 ALTAMONT AVENUE #101**

\_\_\_\_\_  
Address

**FORT MYERS, FL 33901**

\_\_\_\_\_  
City/State and Zip Code

**karenovitch@me.com**

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification) ✓

For further information concerning this matter, please call:

**KAREN GOLDBERG**

\_\_\_\_\_  
Name of Person

at ( 239 ) 334-0210

\_\_\_\_\_  
Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

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

**Enclosed is a check for the following amount:**

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
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: CUSTOM FITNESS OF FORT MYERS LLC
2. (a) 2059 ALTAMONT AVENUE  
Principal office address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**)  
#101  
FORT MYERS, FL 33901
- (b) 2059 ALTAMONT AVENUE  
Mailing address of limited liability company:  
(Note: **MAY BE POST OFFICE BOX**)  
#101  
FORT MYERS, FL 33901

3. JUNE 15, 2015  
Date of filing/registration in Florida
4. L15000105120  
Document number

5. (a) BARBARA M PIZZOLATO PA  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
12751 NEW BRITTANY BLVD  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
SUITE 402  
FORT MYERS, FL 33907

- (b) KAREN GOLDBERG  
Enter name of NEW Registered Agent and/or NEW Registered Office address:  
CUSTOM FITNESS OF FORT MYERS LLC  
NEW Registered Office Address:  
2059 ALTAMONT AVENUE #101  
FORT MYERS, FL 33901

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.

Karen Goldberg KAREN GOLDBERG  
Signature of a member or authorized representative of a member Printed or typed name of signer

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with all 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.*

Karen Goldberg  
Signature of Registered Agent