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COVER LETTER

TO: Registration Section Division of Corporations		1
SUBJECT: Deuson	Fitness, LLC	1
SUBSECT.	Name of Limited Liability Company	
The enclosed Articles of Amendment and	fee(s) are submitted for filing.	
Please return all correspondence concerni	ing this matter to the following:	
	Ian Deuson	
<u></u>	Name of Person PUSON FHUSS LLC	
335 ₁₁ 1	Firm/Company	
<u> </u>	Address	
Deer	City/State and Zip Code	442
dow	sont this (a) amail co	M
	-mail address: (to be used for future annual report not	
For further information concerning this n	natter, please call:	,
Rebacca thomas	at (361) 571	-5359
Name of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the following am	ount:	
\$25.00 Filing Fee \$30.00 Filing Fee Certification	ling Fee & S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fec, Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS Registration Section Division of Corporatio P.O. Box 6327 Tallahassee, FL 32314	Registration Sections Division of Corporation Building 2661 Executive C	orations
Tallahassee, FL 32314	Tallahassee, FL 3	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION | **OF**

Deusen Fitness LLC:	
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on 8 19, 2015 and assigned Florida document number 1500041874	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
The new name must be distinguishable and contain the words "Limited Liability 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)	_
	 -
Enter new mailing address, if applicable:	
	_
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:	: new
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida street address	
City , Florida	—
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply wit	

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.

If Changing Registered Agent, Signature of New Registered Agent

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 $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Reboca Thomas	23054 Rot Gardens W	Cey 12 Add
	_	Apt #424	l □ Remove
		Bora Raton, FL 334	33 Change
AMBR.	lan Newson		
/ <u> </u>		335 NW 41St Avenu Deerfield Beach, FL3	3442_ □ Remove
			Change
			Add
			□ Remove
		1	Change
			Add
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ective date, if other than the date of filing:	(optional)
n effective date is listed, the date must be specific and cannot be prior to date of fili te: If the date inserted in this block does not meet the applicable statuto	ing or more than 90 days after filing.) Pursuant to 60: ry filing requirements, this date will not be list
cument's effective date on the Department of State's records.	'
record specifies a delayed effective date, but not an effective date, but not an effect filed.	ctive time, at 12:01 a.m. on the earli
Orthor 2 2017	
ted October 3 2011.	
	'

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00