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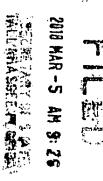
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HARRIS

9097 W Atlantic Ave #110

Delray Beach Fl. 33446

Enclosed is the paperwork containing the filing of articles of amendment removing members.

The return address is listed above. I can be reached via mobile phone (561-376-1057) for any reason.

Thank you,

Alan Sternberg

Manager

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: West Delray Sitness LLC dba orange THEORY Sitness. com Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
ALAN STERNIBERG Name of Person
West DELRAYATNES (LICABA DRANGETHEORY FITNES
9097 W. ATLANTIC AUE #110 Address
De LRAY BEACH Fl. 33446 City/State and Zip Code
ASTERNBERGE ON ANGETHEORY & TWESS. Com E-mail address: (to be used for future annual report hotification)
For further information concerning this matter, please call:
ALAM STERNBERG at (561) 376-1657 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \text{\$30.00 Filing Fee & Certificate of Status}\$\$ Certified Copy (additional copy is enclosed) \$\Bigcup \text{\$60.00 Filing Fee, Certified Copy (additional copy is enclosed)}\$\$\$ Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

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

West Delray Fitr	less "LL	<u> </u>			
(Name of the Limited Liability Company a (A Florida Limited Liabi	it now appears on our ity Company)	records.)			
and assigned orida document number \(\(\lefta \)					
Florida document number 4/5/000/8/5/8.					
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 C	ompany," the designation	on "LLC" or the abbrevia	ition "L	.L.C."	-
Enter new principal offices address, if applicable:		Fig	20		_
(Principal office address MUST BE A STREET ADDRESS)				<u> </u>	_
				With the s	- 18.44
			Ś	4	***
Enter new mailing address, if applicable:		A	<u>\$</u>	F 3.4.	-
(Mailing address MAY BE A POST OFFICE BOX)		9.4	••	granted store	_
		***	6 5		_ <u>,</u> -
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	address on our r	records, enter the	name	of the	<u>new</u>
Name of New Registered Agent:				<u></u>	_
New Registered Office Address:	F 4 F1 · 1				-
	Enter Florida stree	e adaress			
	City	, Florida	p Code	 	-
New Registered Agent's Signature, if changing Registered Agent:	City	23,	COME		

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.

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 = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	IAN PARKER	9901 EDGEWATER COURT	🗆 Add
		PARKLAND FL. 33076	Remove
			Change
AMBR	WENDY PARKER	9901 EDGEWATER COUT	□ Add
		PARKLAND FL. 33076	■ Remove
			Change
			🗀 Add
			□ Remove
			Change
			🗆 Add
			TO Remove
			All Change
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			Reneve
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			_□ Change

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e: If the date inserted in this block does not meet the applicable statutory filing requirement's effective date on the Department of State's records.	irements, this date will not be l	listed as t
union s creetive date on the Department of State s records.		
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record specifies a delayed effective date, but not an effective time, he 90th day after the record is filed.	at 12:01 a.m. on the ea	
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ed February 21, 2015,		MAR
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Signature of a member of authorized representative of a m	nember A	R

Page 3 of 3

Filing Fee: \$25.00