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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

	Registration Se Division of Cor					
SUBJEC	System Fitz	iess LLC				
SOBJEC	,1.	Name of Lim	ited Liability Company	 		
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please re	turn all correspo	ndence concerning this matter	to the following:			
		Chris Epler				
			Name of Person		_	
		System Fitness LLC				
			Firm/Company		-	
		3102 Nina Court			.	
			Address		SEC 5	
		Merritt Island, FL 32953			A B F I	1
			City/State and Zip Code	•••	- SSEE = [Π
		system.fitness@yahoo.com	to be used for future annual report notificat	t(on)	三年の 星 (
For furth	er information c	oncerning this matter, please c	•	.1011)	PM 2: 54 PF STATE E, FLORIDA	
Chris Ep	ler		321 693-3705		•	
	Name o	f Person		elephone Numbe	er	
Enclosed	is a check for th	ne following amount:				
\$25.0	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifie	ate of Status &	
	Registr	ING ADDRESS: ation Section	STREET/COURIER Registration Section			

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

TO:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

System Fitness LLC		
(Name of the Limited Liability Company of (A Florida Limited Liab	s it now appears on our records.) lity Company)	
The Articles of Organization for this Limited Liability Company we	re filed on 11/12/2015 and assign	ned
Florida document number L15000191109		
This amendment is submitted to amend the following:		
If amending name, enter the new name of the limited liability company here: new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." ter new principal offices address, if applicable: incipal office address MUST BE A STREET ADDRESS) ter new mailing address, if applicable:		
The new name must be distinguishable and contain the words "Limited Liability (Company," the designation "LLC" or the abbreviation "L.L.C	C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
	TAS: 5	
Enter new mailing address, if applicable:	LCR D	
(Mailing address MAY BE A POST OFFICE BOX)		<u></u>
_		П
	TS P	0
B. If amending the registered agent and/or registered office		the r
registered agent and/or the new registered office address here:	10% 10%	
Name of New Registered Agent:		
Name Descriptional OCC - Address.		
New Registered Office Address:	Enter Florida street address	
	, Florida	
	City Zîp Code	

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 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>	<u>Name</u>	Address	Type of Action
AMBR	Elaine Hanson	626 Heather Stone Drive	Add
		Merritt Island, FL 32953	☐ Remove
			☐ Change
		*****	Add
		The state of the s	Remove
		· · · · · · · · · · · · · · · · · · ·	Change
		<u> </u>	ZS DĀdd
			CONCENSION Remove
			Consider 2
			☐ Remove
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Note: If t	e date, if other than the dat ive date is listed, the date must be the date inserted in this block t's effective date on the Depar	does not meet the appli	cable statutory filing re	(optiona than 90 days after filin equirements, this da	ul) ng.) Pursuant to 605. te will not be liste	.0207 ed as
	rd specifies a delayed ef Oth day after the record		ot an effective tim	e, at 12:01 a.m	n. on the earlie	er o
Dated	Dec 12	, 2015	<u>_</u> .			
	<u> </u>	nature of a member or aut	horized representative of	a member	····	
	CHRIS	EPLER	,			
	UNKIS	•	ited name of signee			

Page 3 of 3

Filing Fee: \$25.00