

L16000017588

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE  
NOV 15 2016



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 31, 2016

SANJAY PARAG  
2485 METROCENTRE BLVD  
WEST PALM BEACH, FL 33407

SUBJECT: GETFIT PALM BEACH, LLC  
Ref. Number: L16000017588

We have received your document for GETFIT PALM BEACH, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 216A00023316

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TALLAHASSEE, FLORIDA

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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** GetFit Palm Beach, LLC

\_\_\_\_\_  
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:

Sanjay Parag

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

GetFit Palm Beach, LLC

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

2485 Metrocentre Blvd

\_\_\_\_\_  
Address

West Palm Beach, FL 33407

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

sparag79@gmail.com

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

For further information concerning this matter, please call:

Sanjay Parag

754

264-6192

at (\_\_\_\_\_) \_\_\_\_\_

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

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee &  
Certificate of Status &  
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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

GetFit Palm Beach, 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 January 25, 2016 and assigned  
Florida document number L16000017588.

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 new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

Zip 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>	<u>Address</u>	<u>Type of Action</u>
MBR	Marcos Prado	2485 Metrocentre Blvd	<input type="checkbox"/> Add
		West Palm Beach, FL 33407	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	Chris Richetti	2485 Metrocentre Blvd	<input type="checkbox"/> Add
		West Palm Beach, FL 33407	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	Victor Lumsden	15978 Knolls Lodge Dr	<input checked="" type="checkbox"/> Add
		Houston, TX 77095	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	Parag Development & Mgt, Inc	2485 Metrocentre Blvd	<input type="checkbox"/> Add
		West Palm Beach, FL 33407	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Hemal Parag	2485 Metrocentre Blvd	<input checked="" type="checkbox"/> Add
		West Palm Beach, FL 33407	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Hemal Parag	2485 Meterocentre Blvd	<input checked="" type="checkbox"/> Add
		West Palm Beach, FL 33407	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)  
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing. Pursuant to 605.0007 (3)(b)  
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated November 7 2016

Signature of a member or authorized representative of a member

Sanjay Parag

Typed or printed name of signee