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COVER LETTER

	stration Sec ion of Corp				•		
	B2F АРРАЯ	REL LLC					
SUBJECT: _		Name of Lim	ited Liability Company	y			
The enclosed a	Articles of z	Amendment and fee(s) are sub	mitted for filing.				
Please return a	all correspoi	ndence concerning this matter	to the following:				
		Myron Ray					
		·	Name of Persor	n			
		B2F Apparel LLC					
			Firm/Company	<i>;</i>			
		6933 Towering Spruce Dri	ve				
			Address				
		Riverview, FL 33578					
			City/State and Zip G	Code	·		
		raymyron20@yahoo.com					
r cut te	•		to be used for future ar	anual report notifie	alion)	-(1)	202:
For lufther int	ormation co	oncerning this matter, please co	an:			F	2024 JAN
Myron Ray			813 at (947-0147		:	¥ 23
	Name of		Area Code	Daytime T	elephone Number	170	3 FH 3:
1		e following amount:					55
\$25.00 Fil	ling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Certified Cop (additional copy	oy.	Certified (e of Status &	ı
Regi	ing Address istration S sion of Co		Reg	et Address: gistration Sectivision of Corpe			
P.O.	Box 632	7	The	e Centre of Tal	lahassee		

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

B2F APPAREL LLC			
(<u>Name of the Limited Liability Company</u> (A Florida Limited Li:	as it now appears on our records.) bility Company)		
The Articles of Organization for this Limited Liability Company w	ere filed on 04/27/2016	and assigne	ed
Florida document number L16000083336			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabili	ty company here:		
B2F FITNESS SOLUTIONS & APPAREL LLC			
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the al	obreviation "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 ad	dress on our records, <u>enter the nan</u>	ne of the new re	gistered
agent and/or the new registered office address here:		72	
		- 5	
Name of New Registered Agent:		. 2	72% क्या <u>१</u> ७ अ
		$\omega_{ij} = \omega_{ij}$: : -:
New Registered Office Address:	Enter Florida street address		
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	Florida	ு ப	
	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 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
	<u></u>		□Add
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