LIG 0000 95626

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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FILED 2024 DEC 30 PH 2: 55 SEVERAL ATTACK



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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I2000000088 If there are any issues please contact Patrice at 850-202-9071

Date: 12/30/2024

Name: Cheyanne Davis

Reference #: 2566219

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FITNESS VENTURES, LLC

Articles of Incorporation/Authorization to Transact Business

Amendment

- ✓ Change of Agent
- Reinstatement

] Merger

Dissolution/Withdrawal

Fictitious Name

Other_____

Authorized	Amount:	\$25.00	
Signature:	Ohyperd	Paine	

 CORPORATE HQ COGENCY GLOBAL INC. 10 E 40[™] ST. 10[™] FL NY, NY 10016 D: +1.212.947.7200 P: 800.221.0102 F: 800.944.6607

EUROPEAN HQ COGENCY GLOBAL (UK) LIMITED REGISTERED IN ENGLAND & WALES. REGISTER #8010712 6 LLOYDS AVE, UNIT 4CL LONDON EC3N 3AX +44 (0)20.3961.3080 ASIA PACIFIC HQ
COGENCY GLOBAL (HK) LIMITED
A HONG KONG LIMITED COMPANY
UNIT B, I/F, LIPPO LEIGHTON TOWER
103 LEIGHTON RD, CAUSEWAY BAY
HONG KONG
P: +852.2682.9633
F: +852.2682.9790

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Name of the limited liability company:		FITNESS VENTURES, LLC		
	no change		no change	
	Principal office address of limited liability company: (<i>Note: MUST BE STREET ADDRESS</i>)		Mailing address of limited liability company (<u>Note: MAY BE POST OFFICE BON</u>)	
		-	L 16000095626	
	Date of filing/registration in Florida	4.	Document number	
(a)	LOWMAN, JR., WILLIAM R, ESQ	•		
(a)	Registered Agent and Registered Office shown on the records of t		pt. of State:	
	SHUFFIELD, LOWMAN & WILSON,	P.A.		
	Registered Office Address (MUST BE FLORIDA STREET .			
	1000 LEGION PLACE SUITE 170	0		
	ORLANDO, FL	3280		
(b)	Cogency Global Inc.		2024 DEC 30 PH 2: 5 SECULIA HASSEE, FI	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office addre		
	115 North Calhoun Street, Suite 4	1	SEE. T	
	NEW Registered Office Address:		FLEE S5	
	Tallahassee . FL	3230	01	

the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

/s/ Noemi Romero

Noemi Romero

Signature of a member or authorized representative of a member

Printed or typed name of signee

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.

/s/ Tim Mayville

Signature of Registered Agent

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Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00