L160001221460

(Re	questor's Name)	
(Ād	dress)	
(Ad	dress)	
(/ 12	(a. 666)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
	,	•
/D-		
(00	cument Number))
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
Special instructions to	r illing Officer.	
		, -

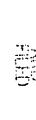
Office Use Only



900286869899

09/06/16--01022--024 **25.00





DEPARTISENT OF STATE

SEP US LOW

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Kingz and Queenz Fitness 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:	
Kelvin Frazier	
Name of Person	
Kingz and Queenz Fitness	
2718 Agalachee Par Kway	
Tallahassee FL 32301 City/State and Zip Code	
Kingzand Queen Fitness @ amail.com E-mail address: (to be used for future annual report notification)	
For further information concerns by this matter, please call:	·
Kelvin Frazier at (850) 321-2358 (2) Name of Person Area Code Daytime Telephone Number 5	1
Enclosed is a check for the following amount:	
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & 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

Kingz and Queer	nz Fitness LLC
(A Florida Lim	ompany as it now appears on our records.) nited Liability Company)
The Articles of Organization for this Limited Liability Comp	pany were filed on
Florida document number L16000172146.	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	l liability company here:
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRES	SS)
·	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. Granending the registered agent and/or registered agent and/or the new registered office address	red office a diress on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	Shy down

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 = Aut	horized Member		
Title	<u>Name</u>	Address	Type of Action
NGR	Freddie Scott Jr	334 CASWYCK TRACE	
		Johns Creek GA 300	27 IX Remove
	•		☐ Change
			🖸 Add
			□ Remove
			Change
	·		D Add
	·	· · · · · · · · · · · · · · · · · · ·	□ Remove
			Change
		7	Remove ♥
			Change
			🗖 Add
			☐ Remove
		· 	Change
			🗆 Add
			Remove
			C Change

	-			
*				
-				
	·			
_				
		-		
	· · · · · · · · · · · · · · · · · · ·			
-				
			É s	(2)
			1	G.
			- 17. A. - 17.	9-
		· · · · · · · · · · · · · · · · · · ·	***	- TO
	· · · · · · · · · · · · · · · · · · ·			3.05
_			—	
rr	e date, if other than the date of filing: (optional ive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing)		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00