

L16 000 140 806

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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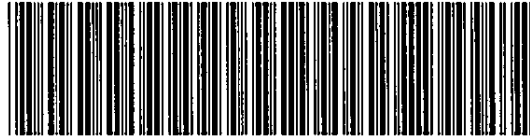
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 23 2016
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: STAY FIT ACTIVE GEAR, 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:

LESLIE METZ

Name of Person

Firm/Company

731 TRADEWIND DRIVE

Address

NORTH PALM BEACH, FL 33408

City/State and Zip Code

LESLIE . A. METZ @ GMAIL.COM

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

For further information concerning this matter, please call:

Leslie Metz

Name of Person

at (561) 339-2839

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

STAY FIT ACTIVE GEAR, LLC

STAY FIT ACTIVE WEAR, LLC

Page 1 of 3

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>
			☐ Add
			☐ Remove
			☐ Change
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TALLAHASSEE, FLORIDA
16 JUN 22 PM 2:46

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

This is a scan of a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 visible lines. At the very top edge, there are some faint, dark marks that appear to be ink smudges or artifacts from the scanning process. The rest of the page is completely blank except for the lines.

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 605.0207 (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 August 18, 2016.


Signature of a member or authorized representative

Leslie Metz

Typed or printed name of signee

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