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COVER LETTER

SUBIFOT	True and F	it Nutrition, LLC		
SUBJECT		Name of Lir		
The enclose	ed Articles of	Name of Limited Liability Company Name of Limited Liability Company		
			-	
	Division of Corporations True and Fit Nutrition. LLC Name of Limited Liability Company enclosed Articles of Amendment and fee(s) are submitted for filing. se return all correspondence concerning this matter to the following: Lisa Mays Name of Person True and Fit Nutrition. LLC Firm/Company 7930 sw 125th NT Address Pincerest. FL 33156 City/State and Zip Code lisamays 1010@yahoo.com E-mail address: (to be used for future annual report notification) urther information concerning this matter, please call: Mays 954 980-2273 Name of Person Name of Person			
			Name of Person	
		True and Fit Nutrition, LI	C	
			Firm/Company	
		7930 sw 125th ST		
			Address	
		Pinecrest, FL 33156		
		 -	City/State and Zip Code	
	Division of Corporations True and Fit Nutrition, LLC Name of Limited Liability Company Seed Articles of Amendment and fee(s) are submitted for filing, urn all correspondence concerning this matter to the following: Lisa Mays Name of Person True and Fit Nutrition, LLC Firm/Company 7930 sw 125th ST Address Pinecrest, FL 33156 City/State and Zip Code lisurnays 1010@yahoo.com E-mail address: (to be used for future annual report notification) r information concerning this matter, please call: S Name of Person Area Code Paytime Telephone Number S a check for the following amount: O Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) Auditional copy is enclosed) Mailing Address: Registration Section Division of Corporations O. Box 6327 The Centre of Tallahassee			
			·	ification)
For further i	nformation c	oncerning this matter, please c	all:	
Lisa Mays				
	Name o	f Person		ne Telephone Number
Enclosed is	a check for th	ne following amount:		
\$25.00	Filing Fee		Certified Copy	Certificate of Status & Certified Copy
				ertion
P.C	D. Box 632	7	The Centre of 1	Fallahassec
Tal	llahassee, F	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

True and Fit Nutrition, LLC	
(Name of the Limited Liability Company as it now appears on our reco (A Florida Limited Liability Company)	rds.)
The Articles of Organization for this Limited Liability Company were filed on 2/25/2022	and assigned
lorida document number L16000150243	
his amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited liability company here:	
he new name must be distinguishable and contain the words "Limited Liability Company," the designation "LL	.C" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	
	-
nter new mailing address, if applicable:	·
Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
	10
. If amending the registered agent and/or registered office address on our records, enterent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	
Enter Florida street addre	ess
	lorida

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>	Name	Address	Type of Action
MGR	Andres Silveira	4710 SW 74th Ave	□Add
		Miami, FL 33155	70
			Change
			□Add
			□Remove
			Change
			□ Add
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Affective date, if other than the an effective date is listed, the date mu Note: If the date inserted in this blocument's effective date on the D	ock does not me	et the applicat	date of filing or notes that the statutory filing	(opti ore than 90 days afte g requirements, thi	onal) r tiling.) Pursuant to 60 s date will not be li	05.0207 sted as (
record specifies a delayed effective d is filed.	e date, but not a	n effective tim	e, at 12:01 a.m.	on the earlier of: (l	b) The 90th day af	ter the
July 24		2024				
- Awlay	Signature of a pu	ember or author	zed representativ	of a member		
1 1/	CHEMOTOR OF BUILD	more of audion	nea representative	or a menuel		
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