117 COOO 20987

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
<u></u>
Special Instructions to Filing Officer:

Office Use Only



000329393320

05/20/19--01011--012 **25.00

D SCOTT JUN - 6 2019

COVER LETTER

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

TO:

÷.

Division of Cor	porations			
	BARRE RADIANCE	LLC		
SUBJECT:	Name of Limi	Name of Limited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filing.		
	ondence concerning this matter			
	ı	DANIELLE B MORANO		
	· · · · · · · · · · · · · · · · · · ·	Name of Person		
	E	BARRE RADIANCE LLC		
		Firm/Company	20	
•	:	210 PATRICIA AVENUE		
		Address	A DO Ob	
		DUNEDIN, FL 34698		
		City/State and Zip Code	<u> </u>	
		nfo@bodybarrestudio.com to be used for future annual report notif	ication)	
For further information of	concerning this matter, please ca	•		
DANIEL	LE B MORANO		0-7641	
Name (of Person	at () Area Code Daytime	: Telephone Number	
Enclosed is a check for t	he 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)	
Regis	LING ADDRESS: ration Section on of Corporations	STREET/COURI Registration Section Division of Corpor	en	

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

BARRE RADIANCE	LLC
(<u>Name of the Limited Liability Company as it i</u> (A Florida Limited Liability)	now appears on our records.)
The Articles of Organization for this Limited Liability Company were fi	01/07/0017
Florida document numberL17000020987	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability co	mpany here:
The new name must be distinguishable and contain the words "Limited Liability Com	pany," the designation "LLC" or the abbreviation "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 acregistered agent and/or the new registered office address here:	ddress on our records, enter the name of the name
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Florida
	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

Thereby 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>	<u>Name</u>	Address	Type of Action
MGR	Stephanie Reitz	7135 Nicole Lane Largo, FL 33771	_ Add
			Remove
			☐ Change
			Remove
			Change
			Addy = I
			Remove Change
			□ Remove
			Change
			Add
			Remove
			Change
			☐ Remove
			Change

	-							
								_
			/					 -
					<u>.</u>			
		_/			- -			
	<u> </u>			-		- :-	204 1	-:1
	-	·	· · · · · · · · · · · · · · · · · · ·				W 20	
						1	>	
		· -	- 		-	:	90 t	
E. Effective dat	e, if other than the	e date of filing	i:	4/9/2019		ptional)		405 0 3 07
Note: If the o	nte is listed, the date mu late inserted in this b Tective date on the D	lock does not m	eet the applica	to date of filing or me able statutory filing	ore than 90 days; g requirements.	this date v	vill not be	listed as
document s e	rective date on the L	pepartinent of Si	iale s records.					
If the record s (b) The 90th	pecifies a delaye day after the rec	d effective d	ate, but no	t an effective t	ime, at 12:0	1 a.m. c	n the ea	arlier of
Dated	/15 / 19	Daniel		 Orano				
		· 1	. 'YV]				

Page 3 of 3

Filing Fee: \$25.00