## 47000184466

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name)	_
(Do	ocument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
	Office Use Only	



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17 DEC -6 PH12: 08

S. WARREN DEC 0 8 2017



October 23, 2017

FISH FITNESS LLC 850 E LIME STREET 2782 TARPON SPRINGS, FL 34688

SUBJECT: FISH FITNESS LLC Ref. Number: L17000184466

We have received your document for FISH FITNESS LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Warren Regulatory Specialist II

www.sunbiz.org

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Letter Number: 517A00021351

## **COVER LETTER**

SUBJECT:			
	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
		Name of Person	
		Firm/Company	
		Address	
		City/State and Zip Code	
For further information c	oncerning this matter, please c	to be used for future annual report notifiall:	ication)
Name o	f Person	at () Area Code Daytime	: Telephone Number
Enclosed is a check for the	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)

MAILING ADDRESS:

Registration Section Division of Corporations

TO:

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

	/ C
(Name of the Limited Liability Com (A Florida Limited	ipany as it now appears on our records.) ed Liability Company)
The Articles of Organization for this Limited Liability Compar	ny were filed on 8-29-17 and assigned
Florida document number 4/7000/84466	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited li	ability company here:
The new name must be distinguishable and contain the words "Limited Lis	ability Company," 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 registered agent and/or the new registered office address he Name of New Registered Agent:	office address on our records, enter the name of the neere:
New Registered Office Address:	
	Enter Florida street address
	, Florida
	LIIV /in Code
New Registered Agent's Signature, if changing Registered Agen	

Page 1 of 3

## or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			Change
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fective date, if other than the o	late of filing:	(optional)
n effective date is listed, the date must	be specific and cannot be prior to date of filing o	(optional) or more than 90 days after filing.) Pursuant to 605.0 iling requirements, this date will not be listed
cument's effective date on the De		<i>y</i> 1
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record specifies a delayed The 90th day after the reco	errective date, but not an effective rd is filed.	re time, at 12:01 a.m. on the earlier
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ited <u>Nov 9</u>	, 2017	
N	1.11	<del></del>
	Signature of a member or authorized representa	dive of a member
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CAL	Typed or printed name of signe	
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	->kk	
	Page 3 of 3	<b>PH I2: 08</b> □ - 3   4   1 □   FL 08  0

Filing Fee: \$25.00