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| (Re | questor's Name) | | | |
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COVER LETTER

| TO: Registration S Division of C | | | | | | |
|---|--|----------------------------------|--|-------------|----------|-----|
| SUBJECT: Sen | tient Fitness | LLC | | | | |
| 30B31,C1. | | Name of Limited Liab | ility Company | | _ | |
| Dear Sir or Madam: | | | | | | |
| The enclosed Statemen | t of Correction and fee(s) | are submitted for filing | ζ. | | | |
| Please return all corres | pondence concerning this | matter to the following | ; : | | | |
| Marcel Ro | segreen-Wa | alters | | | | |
| | Name of Person | | - | | | |
| Sentient F | itness LLC | | | | | |
| | Firm/Company | | - | | | |
| 8211 SW 3 | 3rd CT | | | | | |
| | Address | | - | | | |
| North Laud | derdale FL, | 33068 | | | | |
| | City/State and Zip Code | | • | 喜 | 2018 | -11 |
| marcelrose | egreen@gm | ail.com | | 1 | 2018 HAR | |
| | o be used for future annua | | | , | -8 -8 | 1 |
| | | | | | The To | C |
| For further information | concerning this matter, pl | ease call: | | | 2: 0 | |
| Marcel Rosegre | een-Walters | 954 | 232-976 | 3 | 0 | |
| Name | of Person | at (at Code | Daytime Teleph | one Number | - | |
| STREET/COURIER A Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, Florida 32 | is Circle | | MAILING ADDR Registration Section Division of Corpora P.O. Box 6327 Tallahassee, Florida | n ations | | |
| Enclosed is a check for | the following amount: | | | | | |
| ⋈ \$25 Filing Fee | S30 Filing Fee & Certificate of Status | S55 Filing Fee of Certified Copy | & S60 Filing Certificate of S Certified Copy | Status & | | |
| CR2E062 (9/15) | | | | | | |

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

| FIRST: | The n | name of the limited liability company is: Sentier | nt Fitness LLC | |
|-----------------------|----------------------------|--|--|---------------|
| | | | | |
| SECON | SD: | The Florida Document number of the limited liabi | L17000260499 | |
| <u> </u> | 1271 | Articles of (| Organization | |
| THIRD | <u>)</u> : | Document to be corrected is: Articles of | Jiganization | |
| | | (CHECK THE APPROPRIATE BOX AND COM | PLETE THE APPLICABLE STATEMENT | |
| X | | ains an incorrect statement. The incorrect statement, nent are as follows: | he reason the statement is incorrect, and the cor | rected |
| | The in | correct statement that needs to be amended is the effective dat | e of Sentient Fitness LLC that was left off as the | |
| | origina | al document was created. The effective date for Sentient Fitnes | s LLC should be an effective date of January 1, 2018. | |
| | Th | ank you in advance for the h | elp with this amendment. | |
| | <u>OR</u> | | | |
| | Was o | defectively signed. The manner in which the docume lows: | nt was defectively signed and the appropriate co | orrection are |
| | | | me n | —(FI |
| | | | 67 0 | (_) |
| | <u>OR</u> | | | |
| | The e | lectronic transmission of the record was defective. | | |
| | \mathcal{O} | MX2 // | 3-5-18 | |
| | | Signature of Authorized Representative | Date | |
| Signatur acceptin | re of n | ew registered agent, if applicable :(NOTE: if correct designation). | ng the registered agent, the new registered agen | ıt must sign |
| New Re | gistere | ed Agent's Signature, if changing Registered Agent: | | |
| provisio obligatio | ns of a ons of chang | ot the appointment as registered agent and agree to a full statutes relative to the proper and complete perfor my position as registered agent as provided for in Cl ge in the registered office address, I hereby confirm to | mance of my duties, and I am familiar with and apter 605, F.S. Or, if this document is being file | accept the |
| | | Registered Ager | it's Signature | |
| | | Filing Fee: Certified Copy: | \$25.00 \$30.00 (optional) | |