

L18000029540

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

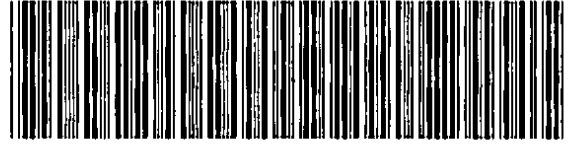
(Business Entity Name)

(Document Number)

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2020 OCT 26 PM 3:16
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CLUB WELLNESS EVOLUTION'S 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:

LYNN HEARN
Name of Person

CLUB WELLNESS EVOLUTION'S LLC
Firm/Company

216 ANTHONY LANE
Address

JUPITER, FLORIDA 33458
City/State and Zip Code

LYNNCHARN@GMAIL.COM.
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LYNN HEARN at (561) 310-2499
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 18, 2020

LYNN COLEEN HEARN
216 ANHINGA LANE
JUPITER, FL 33458

SUBJECT: CLUB WELLNESS EVOLUTIONS LLC
Ref. Number: W20000107259

We have received your document for CLUB WELLNESS EVOLUTIONS LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A Florida limited liability company cannot convert into another Florida limited liability company. Pursuant to s. 605.0102(23)(a), F.S., "the term 'other business entity' or 'another business entity' means a common law or business trust or association; a real estate investment trust; a general partnership, including a limited liability partnership; a limited partnership, including a limited liability limited partnership; or any other domestic or foreign entity that is organized under a governing law or other applicable law, provided such term shall not include a domestic limited liability company."

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) 245-6052.

Neysa Culligan
Regulatory Specialist II

Letter Number: 620A00017815

RECEIVED
DIVISION OF CORPORATIONS
SEP 21 2020

2020 OCT 26 PM 6:05

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

2020 OCT 26 PM 3:16

SECRETARY OF STATE
TALLAHASSEE, FL

CLUB WELLNESS EVOLUTION'S LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on FEBRUARY 1, 2018 and assigned
Florida document number L18000029540.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

SAVE - CLUB WELLNESS EVOLUTION'S LLC

The new name must be distinguishable and contain the words "Limited Liability 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)

- SAVE -

216 ANHINGA LANE

JUPITER FL 33450

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

SAVE

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

SAVE

New Registered Office Address:

Enter Florida street address

City

Florida

Zip Code

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.

SAVE

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

[illegible]

SECRETARY OF STATE
TALLAHASSEE, FL

SECRETARY OF STATE
TALLMANSSEE, FL

2020 OCT 26 PM 3:16

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Effective date, if other than the date of filing: 08-01-2011 (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)

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 OCTOBER 15., 2020

Signature of a member or authorized representative of a member

LYNN COLEEN HEARN
Typed or printed name of signee