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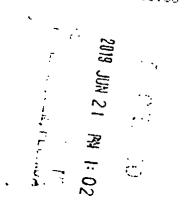


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COVER LETTER

	gistration Se ision of Cor					4.
SUBJECT:	Finally Fit I	LLC		•		
oobject.		Name of Lin	nited Liability Company			
		Amendment and fee(s) are sub	_			
Please return	all correspo	ndence concerning this matter Emily McDuffee	to the following:			
			Name of Person		_	
		Finally Fit LLC				
		3889 SW 108th LN	Firm/Company		<u></u>	
		Ocala, Florida 34476	Address		Z NOT 610Z	<u>}</u>
		thesimplyfitmom@gmail.co			-	- Fig. 5
For further in	nformation co	E-mail address: (oncerning this matter, please c	to be used for future annual report notiful.	fication)		-
Emily McDu	ıffee		724 513-5919 at ()		· <i>U</i>	1
	Name of	f Person		Telephone Numbe	rr	
Enclosed is a	check for th	e following amount:				
□ \$25.00 F	iling Fee	■ \$30,00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ate of Status	

MAILING ADDRESS:

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

rinally rit LLC			
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on ou Liability Company)	r records.)	
The Articles of Organization for this Limited Liability Company	were filed on March 07.	2019	_ and assigned
Florida document number L19000065999			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
Simply Fit Mom LLC			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designati	on "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
			20
		- 5	ر وا
Enter new mailing address, if applicable:		i i ni	
(Mailing address MAY BE A POST OFFICE BOX)	 	:	- 53
			7 0
		<u></u>	
B. If amending the registered agent and/or registered o	ffice address on our	records, enter the	name of the
registered agent and/or the new registered office address her	<u>e</u> :		
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida stre	et address	
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent:			abbreviation "L.L.C." 20 9 JUN 2 - LEGO FILE The name of the
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my du provided for in Chapte	ties, and I am fam r 605, F.S. Or, if t	iliar with and his document
- "			

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
			
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Effective date, if other than the date fan effective date is listed, the date must be sp. Note: If the date inserted in this block d document's effective date on the Departr	pecific and cannot be process not meet the app	licable statut	ling or more than 9 ory filing require	(optional) 0 days after filing.) P ments, this date wi	ursuant to	605.020 listed a
e record specifies a delayed efformation for the secord in the second in	ective date, but is filed.	not an effe	ective time, a	: 12:01 a.m. or	n the ea	rlier (
June 21 at	2019					
Dated	 ,	· ·				
Dated	ature of a member or a	thorized repre	LL L Sentative of a mem	iber		-

Page 3 of 3

Filing Fee: \$25.00