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20 FEB -3 PM 1:42

FEB 04 2020
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SLAM CLICK FITT, LLC
Name of Limited Liability Company

20 FEB - 3 PM 1:42

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALFONSO C. MC DONALD
Name of Person

SLAM CLICK FITT, LLC
Firm/Company

917 LANNES DRIVE
Address

MISSISSIMMEE, FL 34759
City/State and Zip Code

MALEAMS@G-MAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ALFONSO C. MC DONALD at (352) 978-0657
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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
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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

SLAM CLICK FITT, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

RECEIVED
20 FEB -3 PM 1:42

The Articles of Organization for this Limited Liability Company were filed on 4-24-2019 and assigned
Florida document number L19000111379

This amendment is submitted to amend the following:

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

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**)

917 CANNES DRIVE
MISSIMMEE, FL 34759

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

917 CANNES DRIVE
MISSIMMEE, FL 34759

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:

ALFONSO MC DONALD

New Registered Office Address:

917 CANNES DRIVE

Enter Florida street address

MISSIMMEE

City

Florida

FL 34759

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.



If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

_____ ☐ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Effective date, if other than the date of filing: _____ (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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 1-31 - 2020

James L. Mc Donald
Signature of a member or officer

Signature of a member or authorized representative of a member

ALFONSO M. DONALD

Typed or printed name of signee