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## **COVER LETTER**

		istration Sec sion of Corp			
cuntra		Mission Boo	ot Camp, LLC		
SUBJEC	.1:		Name of Lim	nited Liability Company	
The enclo	osed	Articles of A	Amendment and fee(s) are sub	omitted for filing.	
Please re	turn	all correspor	ndence concerning this matter	to the following:	
			Amy Lang		
				Name of Person	
				Firm/Company	
			10809 Glenhurst Street		
				Address	
			Fort Myers, FL 33913		
				City/State and Zip Code	
			steveandamylang@gmail.co		
For furth	or in	formation on	E-mail address: ( neerning this matter, please co	to be used for future annual report notification)	
		iormation co	neering this matter, piease co	239 940-5746	
Amy Lar	<u>.</u>	Name of	Person	at () Area Code Daytime Telephone Number	
Enclosed	l is a	check for the	c following amount:		
<b>■ \$25.</b> 0	00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)	tus &
	Reg Div P.O	ling Address distration S dision of Co display Box 6327 dahassee, F	ection orporations 7	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

MISSION BOOT CAMP, LLC

company has been notified in writing of this change.

(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our rec Liability Company)	ords.)
The Articles of Organization for this Limited Liability Company	were filed on 11/04/2019	and assigned
Florida document number 300336566433		The Table
This amendment is submitted to amend the following:		and assigned
A. If amending name, enter the new name of the limited liab	ility company here:	
STEELE CORE FITNESS, LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	10809 Glenhurst Street	
(Principal office address MUST BE A STREET ADDRESS)	Fort Myers, FL 33913	
Enter new mailing address, if applicable:	10809 Glenhurst Street	
(Mailing address MAY BE A POST OFFICE BOX)	Fort Myers, FL 33913	, <u> </u>
3. If amending the registered agent and/or registered office a gent and/or the new registered office address here:	address on our records, <u>ent</u>	er the name of the new register
3. If amending the registered agent and/or registered office a agent and/or the new registered office address here:  Name of New Registered Agent:	address on our records, <u>ent</u>	er the name of the new register
igent and/or the new registered office address here:		
Name of New Registered Agent:	address on our records, <u>ento</u> Enter Florida street addi	
	Enter Florida street addı	

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

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>	Name	Address	Type of Action
			□ Add
			□Remove
			□ Change
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(If an et Note:	ive date, if other than the date of filing:
f the reco ecord is f	
Dated	February 13, 2020

Typed or printed name of signee