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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: ABITOS PLLC Account Name Account Number : 120200000189 : (305)774-2945 Phone : (305)774-1504 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **G-FITNESS USA, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

company has been notified in writing of this change.

From: Leticia Sosa

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

To: FDS (Division of Corp)

G-FITNESS USA, LLC							
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our records.) Liability Company)						
The Articles of Organization for this Limited Liability Company Florida document number L20000032047	and assigned						
This amendment is submitted to amend the following:							
A. If amending name, enter the new name of the limited lial	bility company here:						
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC" or	the abbreviation "L.L.C."					
Enter new principal offices address, if applicable:	2023 GRANT STREET						
(Principal office address MUST BE A STREET ADDRESS)	HOLLYWOOD FL, 33020						
Trincipal Office waters (1965) 557 GT 1855		202 SE AL					
10	2023 GRANT STREET	AS A					
Enter new mailing address, if applicable:	HOLLYWOOD FL, 33020	第 ₹ 6					
(Mailing address MAY BE A POST OFFICE BOX)		TILED ZI JUN 16 PM IO: ECRETALY JE STAT AHASSEEL FIORE					
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the						
Name of New Registered Agent:							
New Registered Office Address:	Enter Florida street address						
	, Florida						
	City	Zip Code					
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>						
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office	e performance of my duties, and I provided for in Chapter 605, F.S.	am familiar with and Or, if this document is					

If Changing Registered Agent, Signature of New Registered Agent

From: Leticia Sosa Fax: 13057742945

To: FDS (Division of Corp)

Fax: (850) 617-6383

Page: 3 of 4

06/16/2021 2:00 PM

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

Title	Name	Address	Type of Action
MGR	Urbina, Guillermo R	1600 NW 128th Drive 303	□ Add
		Sunrise, FL 33323	≡ Remove
			(Change
MGR	RAMIREZ, CATALINA A	1600 NW 128th Drive 303	
		Sunrise, FL 33323	≣Remove
			□Change
AMBR	PALERMO, CRISTOPHER	VENADO 2 LOTE 378 CANNING	□Add
		BS AS, ARGENTINA 1804 AR	Remove
			□ Change
MGR	PALERMO, FERNANDO	2023 GRANT STREET	[]Add
		HOLLYWOOD FL, 33020	□Remove
			Change
MGR	DIEGO LISANDRO RUTTI	2023 GRANT STREET	≣Add
		HOLLYWOOD FL, 33020	□ Remove
			☐ Change
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			Remove
			□Change

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