

L20000059750

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

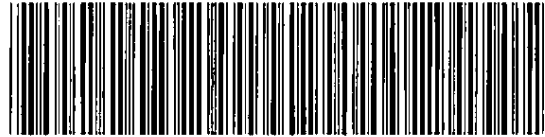
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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 13, 2023

TARA CLIVIO  
11901 SW 68TH COURT  
MIAMI, FL 33156 US

SUBJECT: FROM THE CORE LLC  
Ref. Number: L20000059750

We have received your document for and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

If you have any further questions concerning your document, please call (850) 245-6000.

Summer Chatham  
Regulatory Specialist III  
Director's Office

Letter Number: 723A00020994

SEP 13 2023

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: FROM THE CORE, LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

TARA CLIVIO  
Name of Person

FROM THE CORE, LLC  
Firm/Company

11901 SW 68TH COURT  
Address

MIAMI, FL 33156  
City/State and Zip Code

TARA.CLIVIO@CLUBPILATES.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TARA CLIVIO at ( 305 ) 586-3131  
Name of Person Area Code & Daytime Telephone Number

**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

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR  
LIMITED LIABILITY COMPANY**

*Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

1. Name of the limited liability company: FROM THE CONE, LLC

2. (a) \_\_\_\_\_  
Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS)

11901 SW 68TH COURT  
MIAMI, FL 33156

(b) \_\_\_\_\_  
Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)

11901 SW 68TH COURT  
MIAMI, FL 33156

3. 2/24/2020  
Date of filing/registration in Florida

4. L20000058750  
Document number

5. (a) \_\_\_\_\_  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

TARA ABRAHAMSON-CLIVIO

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

10195 SW 75TH PLACE

MIAMI, FL 33156

(b) \_\_\_\_\_  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

TARA CLIVIO

NEW Registered Office Address:

11901 SW 68TH COURT

MIAMI, FL 33156

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]  
Signature of a member or authorized representative of a member

TARA CLIVIO  
Printed or typed name of signee

*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.*

[Signature]  
Signature of Registered Agent