L20000254693

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(Address)					
(Address)					
(City/State/Zip/Phone #)					
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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088
If there are any issues
please contact Cheyanne at
850-202-1882

Date:	12/30/2024	
Name:	Cheyanne Davis	
Reference	#:2566219	
Entity Nam	FITNESS VENTURE	S - ODESSA LLC
Artic	cles of Incorporation/Authorization to Tra	ansact Business
☐ Ame	endment	
✓ Cha	nge of Agent	
☐ Reir	nstatement	
☐ Con	version	
☐ Mer	ger	702 marine
Diss	solution/Withdrawal	PEC I
Ficti	tious Name	ADTHOEC 30 PM II: 23 SECRETARY OF SET
Othe	er	
		77 23
Authorized	Amount: \$25.00	
Signature:	Oryma Paine	

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.

Name of the limited liability company:			FITNESS VENTURES - ODESSA, LLC			
	no change Principal office address of limited liability company:)	no change failing address of limited liability company: (Note: MAY BE POST OFFICE BON)		
	(<u>Note: MUST BE STREET ADDRESS</u>)	_		(NOIC: MAT BE POST OFFICE BOX)		
	8/26/2020	-		L20000254693		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)						
	Registered Agent and Registered Office shown on the records of th	e Florida	Dept. of State	:		
	SHUFFIELD, LOWMAN & WILSON, P					
	Registered Office Address (MUST BE FLORIDA STREET AL	<u>DDRESS</u>	2			
	1000 LEGION PLACE, SUITE 1700)		202 1		
	ORLANDO FL_	3:	2801	TALL!		
(b)	Cogency Global Inc.			30 ARX		
,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>			2021 DEC 30 AH II: 23 SECRETARY OF 3 PH		
	115 North Calhoun Street, Suite 4			72 2		
	NEW Registered Office Address:			in 33		
	Tallahassee , FL	3	2301			
the cha agent v was/w	imited liability company is not organized under the laws ange or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the li	he regis pility co the lim	stered office ompany, it is sited liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in		
	/s/ Noemi Romero		Noemi Romero			
I here provis the obi to mer	ture of a member or authorized representative of a member by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address, I he d'in writing of this change.	e to act perform for in C ereby co	in this capa ance of my a Thapter 605, onfirm that t	Printed or typed name of signee acity. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed the limited liability company has been		
<i>y</i> - • ·	/s/ Tim Mayville					
Signate	re of Registered Agent					