Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone

: (307)200-2803

Fax Number

: (855)330-1010

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **IULIA DANILOVA FITNESS LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Iulia Danilova Fitness LL				_	
(<u>Name of the Limited</u> (A	Liability Compan Florida Limited Li	y as it now appears on our re ability Company)	cords.)		
The Articles of Organization for this Limited Liab Florida document number L20000344325 This amendment is submitted to amend the follow A. If amending name, enter the new name of the submitted to a su	oility Company v	were filed on <u>08/28/20</u>		and assigned	
The new name must be distinguishable and contain the wor	ds "Limited Liabilit	ty Company," the designation	'LLC'' or the abb	reviation "L.\s.C."	_
Enter new principal offices address, if applicat	ale:	7901 4th St N ST	E 300		_
(Principal office address MUST BE A STREET		St. Petersburg, F	L 33702		_ _
			-	命る言	Σ.Υ. Σ.Α.Υ.
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B)	<u>0X)</u>	7901 4th St N ST St. Petersburg, F	<u> </u>	PM 2: 14	13V(U) - -
B. If amending the registered agent and/or regagent and/or the new registered office address		ddress on our records, <u>ei</u>	nter the name	of the new regist	ered
Name of New Registered Agent:	Northwest	Registered Agent	LLC		_
New Registered Office Address:	7901 4th S				_
		Enter Florida street a			
	St. Petersh		, Florida 33	702	_
		Cuy		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.

H 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	<u>Address</u>	Type of Action
AMBR	DANILOVA, IULIA	7901 4th St N STE 300	□Add
		St. Petersburg, FL 33702	□Remove
			\(\overline{\overline
AMBR	DANILOV, STANISLAV	7901 4th St N STE 300	□Add
		St. Petersburg, FL 33702	□Remove
			ZIChange
			□Add
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			Remove
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Effective date, if other than the date of filing:							
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Signature of a member or authorized representative of a member	Dated October 11		2022	·			
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Filing Fee: \$25.00