

9/17/24, 2:00 PM

Division of Corporations

Florida Department of State
Division of Corporations
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To:

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From:

Account Name : KATZ BARRON
Account Number : 072627002473
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: adam@katzbarron.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CENTURY MIDTOWN CLUB AND FITNESS CENTER, LLC**

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

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K. SALY

SEP 18 2024

H24000316678 3

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Century Midtown Club and Fitness Center, LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on December 2, 2020 and assigned
Florida document number L20000367159.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

645 Madeira Ave.

(Principal office address MUST BE A STREET ADDRESS)

Coral Gables, FL 33134

Enter new mailing address, if applicable:

645 Madeira Ave.

(Mailing address MAY BE A POST OFFICE BOX)

Coral Gables, FL 33134

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Nancy Pastor

New Registered Office Address:

645 Madeira Ave.

Enter Florida street address

Coral Gables, Florida 33134

City

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.


If Changing Registered Agent, Signature of New Registered Agent

H24000316678 3

H24000316678 3

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Sergio Pino	1805 PONCE DE LEON BLVD., #100	<input type="checkbox"/> Add
		Coral Gables, FL 33134	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Joseline Pereira	1805 PONCE DE LEON BLVD., #100	<input type="checkbox"/> Add
		Coral Gables, FL 33134	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Nancy Pastor	645 Madeira Ave.	<input type="checkbox"/> Add
		Coral Gables, FL 33134	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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Dated September 16, 2024

Adam Schucher, Esq.

Typed or printed name of signee

Filing Fee: \$25.00