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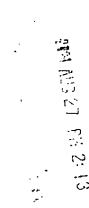
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COVER LETTER

Divisi	on of Corpo	rations		•	
N SUBJECT: _	VOE Fitness	LLC			
			ed Liability Company		
The enclosed A	articles of An	nendment and fee(s) are subn	nitted for filing.		
Please return al	I correspond	ence concerning this matter to	o the following:		
		Filing Yolanda			
			Name of Person		
		ZenBusiness Inc			
			Firm/Company		
	5511 Parkerest Dr., Suite 207				
			Address		
		Austin, TX 78731			
			City/State and Zip Code		
		fulfillment@zenbusiness.con			
		E-mail address: (to	be used for future annual report notifi	cation)	
For further info	rmation con	cerning this matter, please cal	II:		
Filing Yolanda			at () 493-6249 Area Code Daytime		
	Name of Pe	erson	Area Code Daytime	Telephone Number	
Enclosed is a cl	neck for the f	following amount:			
≡ \$25.00 Filii	ng Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

any as it now appears on our records. Liability Company)	<u>.</u>)
were filed on 02/15/2021	and assigned
(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 2/15/2021 and assigned Florida document number L21000077647 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 "LLC." Enter new principal offices address, if applicable: 12729 Flamingo Pkwy (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: 12729 Flamingo Pkwy Enter new mailing address, if applicable: 12729 Flamingo Pkwy Spring Hill, Fl. 34610 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida	
ility Company." the designation "LLC"	or the abbreviation "L.L.C."
12729 Flamingo Pkwy	
Spring Hill, FL 34610	<u> </u>
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	27
12729 Flamingo Pkwy	P
Spring Hill, FL 34610	
ffice address on our records,	ري ري
Cartain Classic Line 10	
	oility company here: ility Company," the designation "LLC" 12729 Flamingo Pkwy Spring Hill, FL 34610 12729 Flamingo Pkwy Spring Hill, FL 34610 ffice address on our records, re:

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

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>	Type of Action
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AMBR			
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Signature of a member or authorized representative of a member			(YS					
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Page 3 of 3

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