

Oct 26 21:03:33p

GOOD DAY TAX

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L21000087650

Florida Department of State
Division of Corporations
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DIVISION OF CORPORATIONS
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Account Name : GOOD DAY TAX
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Email Address: TODYSOTOFIT@YAHOO.COM

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TAYMA FIT LLC

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A. LUNT

2021 OCT 26 PM 4:06

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TAYMA FIT LLC

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: TAYMA FIT LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MENDEZ GUTIERREZ, FREDIS ANTONIO

Name of Person

TAYMA FIT LLC

Firm/Company

1917 REEF CLUB DR. APT 108

Address

KISSIMMEE, FL 34741

City/State and Zip Code

tonysotofit@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MENDEZ GUTIERREZ, FREDIS ANTONIO

Name of Person

at (407)
Area Code

848-6387

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

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

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

TAYMA FIT LLC

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

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2021 OCT 26 AM 10:17

The Articles of Organization for this Limited Liability Company were filed on 02/22/2021 and assigned
Florida document number L21000087650

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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(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 new registered agent and/or the new registered office address here:

Name of New Registered Agent:

MENDEZ GUTIERREZ, FREDIS ANTONIO

New Registered Office Address:

1917 REEF CLUB DR. APT 108

Enter Florida street address

KISSIMMEE

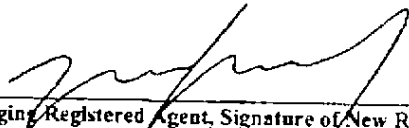
City

Florida 34741

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

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>
AMBR	MENDEZ, FREDIS	1917 REEF CLUB DR. APT 108	<input type="checkbox"/> Add
		KISSIMMEE, FL 34741	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Mendez Gutierrez, Fredis Antonio	1917 REEF CLUB DR. APT 108	<input checked="" type="checkbox"/> Add
		KISSIMMEE, FL 34741	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated OCTOBER 26 2021

Signature of a member or authorized representative of a member:

FREDIS ANTONIO MENDEZ GUTIERREZ

Typed or printed name of signee