

L21000114715

Florida Department of State
Division of Corporations
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H210004175213ABCX

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

To:
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Fax Number : (850)617-6383

From:
Account Name : TAX CONTROLLER INC
Account Number : I20210000142
Phone : (954)301-1848
Fax Number : (954)532-9458

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

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
DAMM FITNESS LLC

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

NOV 12 2021

A. LUNT

2021 NOV 10 PM 4:25

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

((H210004175213))

DAMM FITNESS LLC

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

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DIVISION OF CORPORATIONS
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The Articles of Organization for this Limited Liability Company were filed on 03/10/2021 and assigned
Florida document number L21000114715.

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:

(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: LUIS FERREIRA DOS SANTOS

New Registered Office Address: 22563 SW 66TH AVE APT 207

Enter Florida street address

BOCA RATON FL

Florida 33428

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.

Luis Ferreira dos Santos
If Changing Registered Agent, Signature of New Registered Agent

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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	CARINA DAMM	22563 SW 66TH AVE APT 207	<input type="checkbox"/> Add
		BOCA RATON FL 33428	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	LUIS FERREIRA DOS SANTOS	22563 SW 66TH AVE APT 207	<input checked="" type="checkbox"/> Add
		BOCA RATON FL 33428	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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TAX CONTROLLER INC

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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) Notice of date entered in this block does not meet the applicable statute. Fill in the date of filing or the date of filing and the date of filing.

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 23/26/21

LOS FERRERIAS DOS SPANIOS

Signature of a member or authorized representative of a member

LUIS FERREIRA DOS SANTOS

Typed or printed name of signee

Filing Fee: \$25.00