121000511962

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900399081099

0 1: 2: -01111--010 *•JE.0:

20231111 24 (11111-18





Division of Corporations

March 10, 2023

STEPHEN VALLEY 140 RIVIERA DUNES WAY APT 302 PALMETTO, FL 34221

SUBJECT: NCO FITNESS, LLC Ref. Number: L21000511962

We have received your document for NCO FITNESS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Alecia Rivers Regulatory Specialist II

81:113:1-42:11:18

Letter Number: 223A00005666

COVER LETTER

TO: Registration Section Division of Corporations	s 4
NCO Fitness LLC SUBJECT:	
	ited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	to the following:
Stephen Valley	
Name of Person	
NCO Fitness, LLC	
Firm/Company	
140 Riviera Dunes Way, Apt. 302	
Address	
Palmetto, FL 34221	
City/State and Zip Code	
steve@bradentonbootcamp.com	
E-mail address: (to be used for future annual repor	t notification)
For further information concerning this matter, please ca	all:
Steve Valley 20 at (at (2 230-6298
Name of Person	Area Code & Daytime Telephone Number
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
Enclosed is a check for the following amount:	
■ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Na	ame of the limited liability company: NCO Fitness LLC			
2.	(a)	NCO Fitness, LLC		(b) NCO Fitne	ess. LLC
	(**)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		8051 N TAMIAMI TRAIL SUITE E6		8051 N TA	MIAMI TRAIL SUITE E6
		SARASOTA, FL 34243	_	SARASOT	A. FL 34243
		December 2, 2021		L210005119	62
3.		Date of filing/registration in Florida	4.		Document number
5	(a)	CINDY'S FLORIDA LLC			
J.	(4)	Registered Agent and Registered Office shown on the records of the	he Flori	da Dept. of State	- ::
		NCO FITNESS LLC			
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			-
		8051 N TAMIAMI TRAIL SUITE E6			2
		Sarasota	34243		2023;
		.FL	34243		- · · · · · · · · · · · · · · · · · · ·
	(b)	STEPHEN VALLEY			- 42
	(-)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			
					=
					. <u> </u>
		NEW Registered Office Address:			_
		140 RIVIERA DUNES WAY, APT. 302			-
		PALMETTO , FL	34221		
ch ag wa the	ange ent v is/we arti	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of cles of organization of the operating agreement of the l	registe bility of the li imited	red office and company, it is mitted liability	I the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany. LEY
:	Signa	ture of a nember or authorized representative of a member			Printed or typed name of signee
pro the to	ovisi e obl mere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I h I in writing of this change.	e to ac perform for in ereby	ct in this capa nance of my a Chapter 605, confirm that t	icity. I further agree to comply with the luties, and I am familiar with and accept . F.S. Or, if this document is being filed he limited liability company has been
Si	gnatu	re of Registered Agent			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Nan	ne of the limited liability company: NCO Fitness LL	C	_	
a) _	SCO Fitness, LLC		(b) NCO Fitne	ess, LLC
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		:	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
:	8051 N TAMIAMI TRAIL SUITE E6		8051 N TA	MIAMI TRAIL SUITE E6
:	SARASOTA, FL 34243		SARASOT	CA. FL 34243
Γ.	December 2, 2021		L210005119	062
_	Date of filing/registration in Florida	4.		Document number
(a) _	CINDY'S FLORIDA LLC			
R	Registered Agent and Registered Office shown on the records o	f the Flor	ida Dept. of Stat	e:
] -	NCO FITNESS LLC		·. <u> </u>	_
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE	<u>(SS)</u>	
-	8051 N TAMIAMI TRAIL SUITE E6			200
:	Sarasota	34243 T.		271
-			· -	20231779 214 ATTH: 18
b) _	STEPHEN VALLEY			21
E	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office	address:	<u> </u>
				=======================================
3	NEW Registered Office Address:			- &
-	140 RIVIERA DUNES WAY, APT. 302			
-				-
1	PALMETTO	L 34221		
ge o t wil were	nited liability company is not organized under the la or changes are made, the Florida street address of the Il be identical. Or, in the case of a Florida limited le e authorized by an affirmative vote of the members es of organization of the operating agreement of the re of a member or authorized representative of a member	e registo iability of the l e limited	ered office an company, it is imited liabilit	d the business office of the registered is hereby confirmed that the change(s) y company or as otherwise provided in inpany.