133000338979

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		1
<u> </u>		

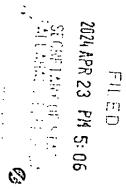




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5/6/24 RW



COVER LETTER

	istration Sec ision of Corp			
SUDIECT.	FIT ELY LLO			
SUBJECT:	-	Name of Lim	ited Liability Company	
The enclosed	l Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return	all correspon	dence concerning this matter	to the following:	
		JOSE POLO TEJEDA		
			Name of Person	
		FIT ELY LLC		
		101-00-1-1	Firm/Company	
		15535 SW 120 ST STE#	8	
			Address	
		MIAMI, FL. 33196		
			City/State and Zip Code	
		libertylegals1@gmail.com		
		E-mail address: (to be used for future annual report noti	fication)
For further in	nformation co	ncerning this matter, please ca	nH;	
JOSE POL	O TEJEDA		305 3162641	
	Name of t	Person	Area Code Daytim	ne Telephone Number
Enclosed is a	check for the	following amount:		
□ \$25.00 F	iling 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
	iling Address:		Street Address:	
	gistration Se vision of Co		Registration Se Division of Cor	
). Box 6327		The Centre of T	•
	lahaceee El			o Street Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FIT ELY LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records liability Company)	<u>r</u>)
The Articles of Organization for this Limited Liability Company	were filed on 08/01/2022	and assigned
lorida document number L22000338979	 	
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited liab	ility company here:	
&J Family and Associates LLC		
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	15535 SW 120 ST STE# 8	<i>-</i> .
Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL, 33196	202
		25- 25-
		R 23
Inter new mailing address, if applicable:	15535 SW 120 ST STE# 8	. (₹ & #
Mailing address MAY BE A POST OFFICE BOX)	MIAMI, FL, 33196	
naming waters may be a rost of free boxy	·	
		3 · · · · · · · · · · · · · · · · · · ·
3. If amending the registered agent and/or registered office a		~ ·
gent and/or the new registered office address here:		
Name of New Registered Agent:		
Non-Berlinson (ORT) Addition		
New Registered Office Address:	Enter Florida street address	
	121 s	مايناه
	City	orida 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>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			
			□Remove
			□Change
			□Add
			□Remove
			□Change

Page 2 of 3

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f an eff <u>Note:</u>	ve date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
	APRIL 17 2024
Sec. 3.	<u> </u>
Dated	a DA
Dated	Signature of a member or authorized representative of a member