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(Re	equestor's Name)	
(Ād	dress)	
(Ad	dress)	
(Cit	:y/State/Zip/Phone #)	
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PICK-UP	WAIT	MAIL
	siness Entity Name)	
ua)	siness Entity Name)	
·		
(Do	cument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filina Officer:	
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S. ROBERTS MAY 1 2 2023

COVER LETTER

Name of Limited Liability Company				
nclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
e return all correspo	ondence concerning this matter	to the following:		
	Hailey Luke			
		Name of Person		
	HAILEY LUKE PERSON	IAL TRAINING, LLC		
		Firm/Company		
	205 Tomoka Trail			
		Address		
	Longwood, FL 32779			
	haileyluke08@gmail.com	City/State and Zip Code		
	E-mail address: (to be used for future annual report notifi	cation)	
urther information o	concerning this matter, please c	all:		
y Luke		321 279-8350		
Name o	of Person		Telephone Number	
sed is a check for t	he following amount:			
25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed	

TO:

Registration Section

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

HAILEY LUKE PERSONAL TRAINING, LLC	
(Name of the Limited Liability Company as it now ap (A Florida Limited Liability Company)	<u>pears on our records.</u>) ny)
he Articles of Organization for this Limited Liability Company were filed on	January 11th, 2023 and assigned
orida document number L23000024901	
nis amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited liability compan	y here:
nconquered Athlete, LLC	
he new name must be distinguishable and contain the words "Limited Liability Company," t	
mean many maintained officers address if amplicables	267?
nter new principal offices address, if applicable:	· · · · · · · · · · · · · · · · · · ·
rincipal office address MUST BE A STREET ADDRESS)	
	<u> </u>
	. •
nter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
. If amending the registered agent and/or registered office address on ou	ir records, <u>enter the name of the new regist</u>
gent and/or the new registered office address here:	
None of New Device and Assess	
Name of New Registered Agent:	
New Registered Office Address:	
Enter	Florida street address
	, Florida
City	Zin 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 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

Title	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
		-	□Change
			□Add
		-	Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 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 _ 2023 nature of a member or authorized representative of a member Hailey Luke Typed or printed name of signee

Filing Fee: \$25.00