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COVER LETTER

	Registration S Division of Co		•	•	
enbir.		L FITNESS LLC			
SUBJEC	·1:	Name of Lim	nited Liability Company		·
The enclo	osed Articles of	f Amendment and fee(s) are sub	omitted for filing.		
Please ret	turn all corresp	ondence concerning this matter	to the following:		
		Filing MichaelD			
			Name of Person		
		ZenBusiness Inc.			
		<u>.</u>	Firm/Company		
		336 E College Ave, Ste 30) I		
			Address	·	
		Tallahassee, FL 32301			
		fulfillment@zenbusiness.cc			
			to be used for future annual r	eport notification	
For furthe	er information (concerning this matter, please c	all:		
Filing MichaelD c/o ZenBusiness Inc.		844 493- at ()	-6249		
	Name (of Person	Area Code	Daytime Telep	hone Number
Enclosed	is a check for t	the following amount:			
≡ \$25.0	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)
	Mailing Addre		Street Ad		
	Registration Division of C	Section Corporations		tion Section of Corporati	ions
	P.O. Box 632			tre of Tallah	

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JOY-FOOL FITNESS LLC

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

The Articles of Organization for this Limited Liability Company were filed on 106/27/2023 and assigned

Florida document number 1.2.30(0)307933

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 many registered agent and/or the new registered Agent:

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

City

Enter Florida street address

_. Florida ___

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added</u> or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Mariia Shevtsova	208 three Islands boulevard	□Add
		apartment 104	=Remove
		Hallandale Beach, FL 33009	□ Change
			□Add
			□ Remove
			Change
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		<u>.</u>	<u></u>
Effective date, if other than the fan effective date is listed, the date mus Note: If the date inserted in this bl document's effective date on the Defective date.	ock does not meet the applicable s	of filing or more than 90 days	optional) after filing.) Pursuant to 605.0207 , this date will not be listed as
e record specifies a delayed effectived is filed.	e date, but not an effective time, a	t 12:01 a.m. on the earlier o	f: (b) The 90th day after the
Dated July 14	. 2023		
/s/ Tetiana	Karpova Signature of a member or authorized		