

L23000357226

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



PICK-UP



WAIT



MAIL

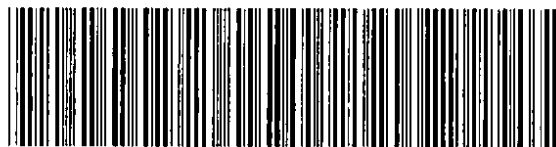
(Business Entity Name)

(Document Number)

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2023 AUG 10 PM 12:17

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ALLAHASSEE, FLORIDA

2023 AUG 10 PM 2:31

RECEIVED

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Healthy Heart Fitness, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Brian Landry

Name of Person

Healthy Heart Fitness, LLC

Firm/Company

1030 SE 9th Street, Unit #150244

Address

Cape Coral, FL 33990

City/State and Zip Code

landry.brian76@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brian Landry

808

6450873

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing 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)

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

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

I want to remove the apostrophe 'S off the word heart. The new name of my company is:

"Healthy Heart Fitness, LLC".

2023 AUG 10 PM 12:17

E. Effective date, if other than the date of filing: _____ (optional)

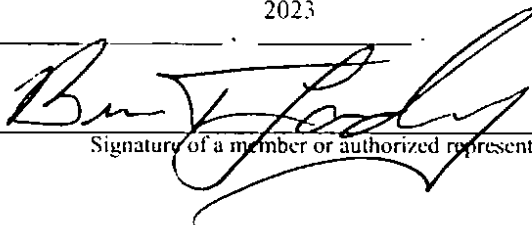
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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 August 7th

2023



Signature of a member or authorized representative of a member

Brian T Landry

Typed or printed name of signee

Filing Fee: \$25.00