23000375204

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



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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I2000000088 If there are any issues please contact Cheyanne at 850-202-1882

Date: _____12/30/2024

Name: _____Cheyanne Davis

Reference #: 2566219

Entity Name: FITNESS VENTURES - URBANDALE, LLC

Articles of Incorporation/Authorization to Transact Business

Amendmeni	t
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<	Change	of	Agent
<u>.</u>	enange	~ .	

Reinstatement

] Merger

Dissolution/Withdrawal



Other_____

Authorized Amou	nt: \$25.00	
Signature:	Ohyma Paine	

 GORPORATE HQ

 COGENCY GLOBAL INC.

 10 E 40™ ST. 10™ FL

 NY, NY 10016

 D: +1.212,947.7200

 P: 800.221,0102

 F: 800.944.6607

EUROPEAN HQ COGENCY GLOBAL (UK) LIMITED REGISTERED IN ENGLAND & WALES, REGISTRY #801072 6 LLOYDS AVE, UNIT 4CL LONDON EC3N 3AX +44 (0)20.3961.3080 ★ ASIA PACIFIC HQ COGENCY GLOBAL (HK) LIMITED A HONG KONG UMITED COMPANY UNIT B, UF, LIPPO LEIGHTON TOWER 103 LEIGHTON RD, CAUSEWAY BAY HONG KONG P: +852.2682.9633 F: +852.2682.9790

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.

N	me of the limited liability company:	FIINESS	VENTURES - URBANDALE, LLC
	no change		no change
	Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)		Mailing address of limited liability company: (<u>Note: MAY BE POST OFFICE BON</u>)
	8/9/2023		L23000375204
	Date of filing/registration in Florida	4.	Document number
(a)	LOWMAN, WILLIAM R		
()	Registered Agent and Registered Office shown on the record:	s of the Florida D	lept. of State:
	Registered Office Address (MUST BE FLORIDA STRE	ET ADDRESS)	
	1000 LEGION PL STE 170	0	SE
	ORLANDO	FL328	SECRETAR SECRETAR
(h)	Cogency Global Inc.		ARY 30
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>		
	115 North Calhoun Street, Su	ite 4	
	NEW Registered Office Address:		
	Tallahassee	FL 323	301

/s/ Noemi Romero Signature of a member or authorized representative of a member Noemi Romero Printed or typed name of signee

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.

/s/ Tim Mayville

Signature of Registered Agent

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 FILING FEE: \$25.00