12300050119

(Requestor's Name)
(Address)
(Address)
(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Eliki, Name,
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100434918431

08/21/24--01030--001 **25.00

Maria of State

13 mm 13/21/24

COVER LETTER

	on of Corp				
CITIES THE STATE	LEX SEN				
SUBJECT			nited Liability Company		_
The enclosed A	rticles of a	Amendment and fee(s) are sub	omitted for filing.		
Please return all	l correspo	ndence concerning this matter	to the following:		
		CARIDAD SOLA			
		·	Name of Person		
		FLEX SENSES LLC			
			Firm/Company		•••
		8315 NW 34 DRIVE			
			4 Address		
		MIAMI, FL 33122			
			City/State and Zip Code	g-1 _{2,0-12}	PH 5: 00
		CARI@ROCKFITNESS.L	IVE to be used for future annual report		
For further infor	rmation co	incerning this matter, please c	·	nouncation)	1., –
CARIDAD SO		, , , , , , , , , , , , , , , , , , ,	646 300444	l n	
		n	at ()		
	Name of	rerson	Area Code Da	ytime Telephone Num	ber
Enclosed is a ch	eck for the	c following amount:			
■ \$25.00 Filir	ng Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifi	Filing Fee, cate of Status & ed Copy nal copy is enclosed)
Regist Divisi P.O. E	g Address tration Scion of Co Box 6327 nassee, F	ection orporations	The Centre of		810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FLEX SENSES LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on November 09, 2023 and assigned Florida document number L23000509679 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: ROCKFITNESS LLC 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 new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida City

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
			□Adđ
			□Remove
			□Change
			Clanige
			Remove
		 იან თ ა	`
 -		The state of the s	OChange C
			□Remove
			□Change
			□Add
			🗆 Remove
			□Change
			□Add
			□Remove
			□Change

								
						-		
		-						
							_	
							-	
				· · · · · ·			.	
					<u> </u>			
		. <u></u>						
						_		
								
		-					- 32	
			-			,	:	
						10° 200.	.>>	
							-0	
						120	က်	<u> </u>
						J.V.E	-	
-								
ffective date, if other to an effective date is listed, the ote: If the date inserted in ocument's effective date	m uns block does ne	n meet the appi	icable statutor	v filing requir	(option 1900) days after the ements, this	e nal) filing.) Pu date will	rsuant to I not be	605.02 listed
record specifies a delayed is filed.	l effective date, but r	not an effective	time, at 12:01	a.m. on the e	arlier of: (b)	The 90	ith day a	after ti
AUGUST 13			$\overline{\Omega}$					
	/ h	acll i	. H					