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COVER LETTER

Division of Co							
	urk 1M=X Pilates LLC						
SUBJECT:	ited Liability Company						
The enclosed Articles o	of Amendment and fcc(s) are sub	omitted for filing					
	oondence concerning this matter						
	and the second	to the tollowing.					
	John Cavanaugh						
		Name of Person					
	Winter Park IM=X Pilates	I.LC					
		Firm/Company					
	13103 Bromborough Driv	e					
		Address					
	Orlando, Florida 32832						
		City/State and Zip Code					
	cavanaugh@imxpilates.con E-mail address: (to be used for future annual report notification)					
For further information	concerning this matter, please c						
John Cavanaugh	O	208 867-0124					
Name of Person		at () Area Code Daytime Telephone Number					
		The code Praince					
Enclosed is a check for	the following amount:						
■ \$25.00 Filing Fec	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)					
Mailing Addr Registration Division of P.O. Box 63 Tallahassee	Section Corporations 27	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	M				

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Winter Park IM=X Pilates 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 May 29,2024 _____ and assigned Florida document number <u>1.24000246530</u> 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 "L.L.C." 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 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 it adopted to the obligations of the position as registered agent as provided for in Chapter 605, F.S. Or, if it is a comment is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited habitary

company has been notified in writing of this change.

or removed from our records.

MGR = Manager AMBR = Authorized Member

<u>Title</u> <u>Name</u>		<u>Address</u>	Type of Action		
Lake Nona P	Lake Nona Pilates LLC	13103 Bromborough Dr Orlando Florida 32832	s Add		
			ПRстюve		
			□Change		
	Health 2 You LLC	4332 Waterford Landing Dr. Lutz FL 33558	🖻 Add		
			□Remove		
AMBR	Allen Haybittle		□Change		
	Anen Hayontie		🗆 Add		
		14463 North Dale Marbry Hiway tampa Bay, FL 336	611 ≣Remove		
			□Change		
AMBR	Allen Haybittle		□Add		
		14463 North Dale Marbry Hiway tampa Bay, FL 336	ili ≣Remove		
AMBR	Maria Pedrosa		_ □ Change		
	- Transit		_ □Add		
		13103 Bromborough Dr Orlando Florida 32832	Remove		
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