185160

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	: #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	<u>.</u>
		8/9





600367665116

06/07/21--01036--004 **35.00

08/12/2021 TH

FILED
2021 AUG -9 AM 9: 26
SECRETARY OF STATE



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 27, 2021

JEANNIE JOSEPH 1760 N JOG ROAD #150 WEST PALM BEACH, FL 33411 US

SUBJECT: ULTIMA GYM & FITNESS CENTER, INC.

Ref. Number: L85160

We have received your document. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

If the corporation is a **PROFIT** corporation it must be signed by a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Jasmine N Horne Regulatory Specialist II

Letter Number: 321A00017509

* Rease see attached - Signed.

Articles of Amendment Articles of Incorporation

FILED 2021 AUG -9 AM 9: 26

Ultima Gvm & Fitness Center, Inc.

lo

		_ 32 (){!	ETARY OF CTA.
(Name of Corpora	tion as currently filed w	ith the Florida Beat of	ISBEDE L
	L85160		
(Docu	iment Number of Corpora	ation (if known)	
Pursuant to the provisions of section 607,1006, Floridate Articles of Incorporation:	da Statutes, this <i>Florida I</i>	^p rofit Corporation adop	ts the following amendment(
A. If amending name, enter the new name of the	corporation:		
name must be distinguishable and contain the word ". "Inc.," or Co.," or the designation "Corp," "Inc. "chartered," "professional association," or the abb	"," or "Co". A profess		
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>ox</u>)		
D. If amending the registered agent and/or regist new registered agent and/or the new registered Name of New Registered Agent			of the
Hume of New Registered Agent			
	(Florida street addre	ss)	
New Registered Office Address:		, F	lorida
	(City)		(Zip Code)
New Registered Agent's Signature, if changing Re Thereby accept the appointment as registered agent.		accept the obligations o	f the position.
Sig	nature of New Registered	l Agent, if changing	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Example:

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	PT John D	<u>oe</u>	
X Remove	V Mike Jo	<u>ones</u>	
X Add	<u>SV</u> <u>Sally S</u>	mith_	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	member	Daniel Abbate	1616 S Club Dr
Add XX Remove			Wellington, FL 33414
2) Change	Manager	Daniel Abbate	1616 S Club Drive
XX Add			Wellington, FL 33414
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. It amending or adding additional At	rticles, enter change(s) here:
(Attach additional sheets, if necessary)). (Be specific)
-	
	
_ 	
F. If an amendment provides for an ex-	schange, reclassification, or cancellation of issued shares, mendment if not contained in the amendment itself:
provisions for implementing the an	nendment if not contained in the amendment itself:
(ij not applicable, inalcate N/A)	
•	
	·

The date of each amendment(s) ad date this document was signed.	option:	, if other than the
•		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment)	file date)
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requartment of State's records.	uirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adoptaction was not required.	sted by the incorporators, or board of directors withou	at shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	sted by the shareholders. The number of votes cast fo ficient for approval.	or the amendment(s)
	oved by the shareholders through voting groups. The ach voting group entitled to vote separately on the an	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	I
by		,,,
	(voting group)	
6/2/2021 Dated Signature	All	
selected	ector, president or other officer – if directors or office by an incorporator – if in the hands of a receiver, tru d fiduciary by that fiduciary)	
	Daniel Abbate	
-	(Typed or printed name of person signing)	
	Manager	
-	(Title of person signing)	