

118000008868

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

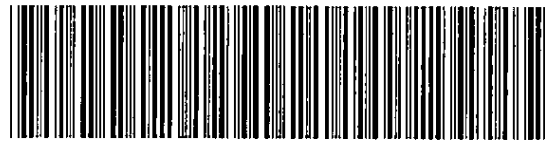
(Document Number)

Certified Copies _____

Certificates of Status _____

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2024 JUN 26 PM 3:10

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TALLAHASSEE, FLORIDA

6/26/24

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: PF PALATKA, LLC

Enter new principal office 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)

2. The Florida document number of this limited liability company is: M18000008868

3. Jurisdiction of its organization: New Hampshire

4. Date authorized to do business in Florida: 09/27/2018

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: PALATKA FITNESS, LLC

(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer 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

Zip Code

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

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the
aforementioned amendment(s), duly authenticated by the official having custody of records in the
jurisdiction under the law of which this entity is organized.

Sean Cahill

Signature of the authorized representative

Sean Cahill

Typed or printed name of signee

Filing Fee: \$25.00

State of New Hampshire

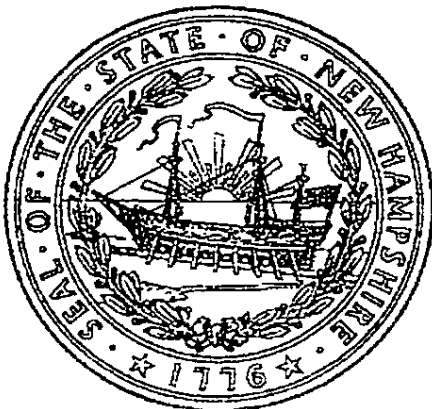
Department of State

CERTIFICATE

I, David M. Scanlan, Secretary of State of the State of New Hampshire, do hereby certify that PALATKA FITNESS LLC is a New Hampshire Limited Liability Company registered to transact business in New Hampshire on August 21, 2014. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned; and the attached is a true copy of the list of documents on file in this office.

Business ID: 713459

Certificate Number: 0006709488



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 25th day of June A.D. 2024.

A handwritten signature in black ink, appearing to read "David M. Scanlan", is written over a circular stamp.

David M. Scanlan
Secretary of State



State of New Hampshire

Department of State



Business Name : PALATKA FITNESS LLC

Business ID : 713459

Filing History

Filing#	Filing Date	Effective Date	Filing Type	Annual Report Year
0006709216	06/07/2024	06/07/2024	Amendment	N/A
0006569151	02/08/2024	02/08/2024	Annual Report	2024
0006420032	01/03/2024	01/03/2024	Annual Report Reminder	N/A
0006106032	02/03/2023	02/03/2023	Annual Report	2023
0005978878	01/05/2023	01/05/2023	Annual Report Reminder	N/A
0005670851	02/15/2022	02/15/2022	Annual Report	2022
0005549414	01/10/2022	01/10/2022	Annual Report Reminder	N/A
0005358296	04/27/2021	04/27/2021	Annual Report	2021
0005202225	01/18/2021	01/18/2021	Annual Report Reminder	N/A
0004950793	07/07/2020	07/07/2020	Registered Agent Change	N/A
0004936360	06/24/2020	06/24/2020	Annual Report	2020
0004711412	01/07/2020	01/07/2020	Annual Report Reminder	N/A
0004562219	08/09/2019	08/09/2019	Annual Report	2019
0004283136	12/31/2018	12/31/2018	Annual Report Reminder	N/A
0004022830	02/27/2018	02/27/2018	Annual Report	2018
0003737782	01/01/2018	01/01/2018	Annual Report Reminder	N/A
0003543070	03/16/2017	03/16/2017	Annual Report	2017
0003472438	12/27/2016	12/27/2016	Annual Report Reminder	N/A
0003218766	01/19/2016	01/19/2016	Annual Report	2016
0003218764	01/19/2016	01/19/2016	Annual Report	2015
0003005059	08/21/2014	08/21/2014	Business Formation	N/A

Trade Name Information

Business Name	Business ID	Business Status
No Trade Name(s) associated to this business.		



State of New Hampshire
Department of State



Name History

Name	Name Type
PF PALATKA LLC	Prev Legal

Principal Information

Name	Title
Timothy Kelleher	Manager
Sean Cahill	Manager