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I ALBRITTON



• CSC - WILMINGTON
251 ,Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: November 17, 2020

Order#: 510605-007

Re: FITNESS1 PEMBROKE, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Erika Zavala Daza c/o Corporation Service Company 251 Little Falls Drive

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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.

1.	Na	me of the limited liability company:	FITNESS1 PEME	ROKE	Ξ, ι —	LLC				
2. (a)	3211 PONCE DE LEON BOULEVAR	RD, SUITE 201	((b)	1501 QU	AIL ST			
(- , .	Principal office address of limited lia (Note: MUST BE STREET A		- `	,	,	Mailing address of limited liab (Note: MAY BE POST OF			
			·	_		SUITE 100				
		CORAL GABLES, FL 33134				NEWPORT BEACH, CA 92660				
		12/13/2018			N	и1800001 ⁻	1275			
3.		Date of filing/registration in	ı Florida	4.	-		Document number			
5. ((a)	KAZANIAN, MALVINA								
		Registered Agent and Registered Office shown on the records of the 3211 PONCE DE LEON BLVD., SUITE 201 Registered Office Address (MUST BE FLORIDA STREET AD				Dept. of State	- :: -	~		
,		CORAL GABLES , FL 33134				-	61 ana 3292			
(b)	Enter name of NEW Registered Agent and/or NEW Registered			ddress:	-	PI			
		Corporation Service Company NEW Registered Office Address:						2: 3	رہے۔	
						· ·	-	0		
		1201 Hays Street					_			
		Tallahassee	, FL_	32301			-			
char ager was	nge nt w /we	mited liability company is not organ, or changes are made, the Florida strovill be identical. Or, in the case of a large authorized by an affirmative vote cles of organization or the operating	eet address of the r Florida limited liab of the members of	egister fility c the lir	red on mit	l office and ipany, it is red liability	d the business office of the shereby confirmed that the y company or as otherwise	ne registe he change	red e(s)	
/s/ Mike Pilatos				М	ike	Pilatos, C	FO/Authorized Person			
Si	gnat	ure of a member or authorized representative	of a member				Printed or typed name of sign	iee		
prov the to m	risii obli iere	by accept the appointment as register ons of all statutes relative to the proping tions of my position as registered live reflect a change in the registered in writing of this change.	per and complete p	ertorn	ar	ice of my a	luties, and I am familiar	with and	accept	
Sign	<u>لل</u> Iatui	re of Registered Agent								
Gi	race	E. Kirby, Asst Vice President of Corporation Division of Corp	Service Company porations P.O. Be	ox 632	27	Tallahas	ssee, FL 32314			

FILING FEE: \$25.00

INHS18 (2/14)