A

N 10000002793

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(Address)		
(Cit	ty/State/Zip/Phone	. #)
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COVER LETTER

TO: Amendment Section Division of Corporations

·
NAME OF CORPORATION: ACTIVE KIDZ FITNESS INC.
DOCUMENT NUMBER: N1000002793
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Brian King (Name of Contact Person)
Active Kidz Fitness Inc (Firm/Company)
4511 NW 168 th Ter- (Address)
Miami Gardens, FL 33055 (City/ State and Zip Code)
E-maileddress: (to be used for future annual report notification)
For further information concerning this matter, please call:
Brian King at (786) 525-0070 (Name of Contact Person) (Area Code & Daytime Telephone Number)
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
■\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Street Address
Amendment Section Amendment Section Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

(Name of Corporation as currently filed with the Florida Dept. of State)

N100000279.3
(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

e new name must be distinguishable and co breviation "Corp." or "Inc." <u>"Company" o</u>			corporated" or the
Enter new principal office address, if apprincipal office address <u>MUST BE A STREE</u>)	· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE		P.O. Box 170 Hialeah, FL	367
If amending the registered agent and/or a	registered offi	·	
If amending the registered agent and/or new registered agent and/or the new regis		ce address in Florida, e	
If amending the registered agent and/or new registered agent and/or the new registered agent: Name of New Registered Agent:		ce address in Florida, e	
new registered agent and/or the new regis	stered office a	ce address in Florida, e	
new registered agent and/or the new registered Agent:	stered office a	ce address in Florida, e ddress:	

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)

<u>Title</u>	Name	<u>Address</u>	Type of Action
Pres_	Brian King Sr.	4511 NW 1L8th Terr Miami Gordins, FL 33055	Add Remove
VΡ	Michael Barnwell	P.O. BOX 320391 Pembroke Pines, FL 33032	Add Remove
			☐ Add ☐ Remove
	ng or adding additional Articles, enter of ditional sheets, if necessary). (Be specifically additional sheets)		
	•		
<u> </u>	` -		

The date of each amendment(s) adoption: $0 - 20//$
Effective date if applicable: $9 - 6 - 2011$
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
adopted by the board of directors.
Dated 9-15 2011
Signature
(By the chairman or vice chairman of the board, president or other officer-if directors
have not been selected, by an incorporator – if in the hands of a receiver, trustee, or
other court appointed fiduciary by that fiduciary)
Brian King Sr
(Typed or printed name of person signing)
President
(Title of person signing)