090000632199

(Re	equestor's Name)	
()	- 	
(Address)		
•	·····	
(Address)		
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL.
(Bı	ısiness Entity Nam	ne)
(Document Number)		
Certified Copies Certificates of Status		of Status
Special Instructions to Filing Officer:		
		:

Office Use Only



900277031329

09/17/15--01008--002 **35.00

SEP 2 2 2015

C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Almost Heaven Fitness Management, Inc. Name of Corporation

DOCUMENT NUMBER: P09000063299

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following:

Lee Kaplan		
Name of Contact Person		
Firm/Company		
204 Duckwood Lane		
Address		
Ponte Vedra Beach, FL 32082		
City/State and Zip Code		

leekaplan01@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lee Kaplan
Name of Contact Person

Name of Contact Person

at (904) 537-3331
Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Almost Heaven Fitness Management, Inc.
2. The principal office address: 4446-1A Hendricks Ave. #210
Jacksonville, FL 32207
3. The mailing address (if different):
4. Date of incorporation/qualification: 07/27/2009 Document number: P09000063299
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Held & Israel
6320 St. Augustine Road, Suite 2
Jacksonville, FL 32217
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Lee Kaplan
204 Duckwood Lane
P.O. Box NOT acceptable Ponte Vedra Beach, FL 32082
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
TACK KNOLAS
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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address. I hereby confirm that the corporation has been notified in writing of this change.
Signature of Registres Agent Date
If signing on behalf of an entity:

* * * FILING FEE: \$35.00 * * *