P11000105238

(Requestor's Name)		
(Ac	Idress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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01/09/13--01013--022 **35.00

13 JAN -9 PH 2: 30

Amend

'JAN 1 4 2013

T. BROWN

COVER LETTER

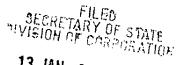
TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: CAHILL'S FI BER: P110001052	TNESS ENTERP	RISES, INC
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
•	SHAYNE CAH	ILL	
•	S.N.K BUSINE		
	4212 COMMEI	Firm/ Company RCIAL WAY	
	SPRING HILL,	FL, 34606	
		City/ State and Zip Cod	e
		@CAHILLFIT sed for future annual report	
For further information	n concerning this matter, pleas	•	
SHAYNE C	AHILL	at (352	5841192
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	ling Address endment Section		Address Iment Section

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

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

Articles of Amendment to Articles of Incorporation of



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CAHILL'S FITNESS ENTERPRISES, INC.

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

P11000105238

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address. If applicable:
(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

(Florida street address)

New Registered Office Address: , Florida
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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)

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	<u>PT</u> <u>John</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	te Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	<u>P</u>	KATE CAHILL	4212 COMMERCIAL WAY
Add			SPRING HILL, FL. 34606
X Remove			
2) Change	V	SUSAN ALASCIA	7285 FOREST OAKS BLVD
Add			SPRING HILL, FL. 34606
X	·		
3) Change	PVTS	S.N.K. BUSINESS IN VETMENTS, LLC	4212 COMMERCIAL WAY
X Add			SPRING HILL, FL. 34606
Remove			
4) Change			
Add			
5) Change		•	
Add			
Remove			
6), Change			
Add			
Remove			

ttach additional sheets, if necessary	rticles, enter change(s) h (Be specific)			
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an amendment provides for an e	change reclassification	or anneallation of	icened charge	
provisions for implementing the a	nendment if not contains	ed in the amendme	nt itself:	
(if not applicable, indicate N/A)	' '	THE WITCH STATE OF THE STATE OF	HI ILGOII	
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The date of each amendment(s) ac	option: 12/17/2012
Effective date if applicable: 01	/01/2013
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	(voting group)
action was not required.	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder
action was not required.	•
Dated 12/17	/2012
Signature (By a d	rector, president or other officer – if directors or officers have not been
	I, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	KATE CAHILL
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)