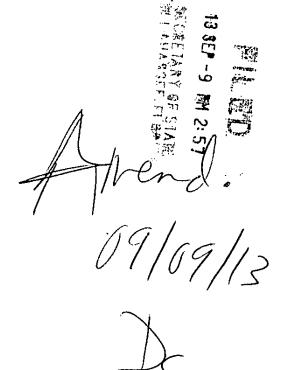
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Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 5, 2013

JUAN C. SAINZ CROSSFIT FORTRESS INC. 2423 SW 147 AVE., #179 MIAMI, FL 33185

SUBJECT: CROSSFIT FORTRESS INC.

Ref. Number: P13000023617

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

THE FIRST PAGE OF THE ARTICLES OF AMENDMENT MUST BE COMPLETED.

The date of adoption of each amendment must be included in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell Regulatory Specialist II

Letter Number: 213A00018696

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Crossfit Fortress Inc	
DOCUMENT NUMBER: _P1 3000023617-	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Name of Contact Person	
Crossfit Fortress INC.	
2423 SW 147 AVR #179	
City/ State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Name of Contact Person at (305) Cost 303541 Area Code & Daytime Telephone Number	12
Enclosed is a check for the following amount made payable to the Florida Department of State:	
\$\Bigcup \text{\$\subseteq} \te	
Mailing AddressStreet AddressAmendment SectionAmendment Section	

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

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

13 gr. 9 gr. 5 s Articles of Amendment Articles of Incorporation ently filed with the Florida Dept. of State) (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: 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." 14024 SW 88 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: N/A 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

P = President; V = V Executive Officer; C held President, Trea Changes should be n	lice President; T= FO = Chief Financ surer, Director wot oted in the followin	sial Officer. If an officer/director holds more Ad be PTD. 13 manner. Currently John Doe is listed as th	Trustee; C = Chairman or Clerk; CEO = Chief than one title, list the first letter of each office e PST and Mike Jones is listed as the V. There is
Mike Jones, V as Ren	s teaves the corpora nove, and Sally Smi	uton, satiy smith is named the v and s. Thest th. SV as an Add	e should be noted as John Doe, PT as a Change,
Example: X Change	•	Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Salt	v Smith	· ·
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1)Change	V	JUDIN C. Sainz	2423 SW147 AVE # [
Add			Miami, FL33185
Remove			
2)Change		Efrain Morales	144718W 42St #212
Add		1	miani, FL 33175
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5)Change		and the second of the second o	and the second of the second o
Add			
Remove	·		
6) Change			
Add		•	
K CDOVA	1		

Page 2 of 4

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;

Please note the officer/director title by the first letter of the office title:

(Attach additional sheets, if necessary)

Attach additiona	dding additional Articles, enter change(s) here: I sheets, if necessary). (Be specific)	•
		•
		•
		-
	 	-
		-
		
		-
	· · · · · · · · · · · · · · · · · · ·	-
If an amendmen	t provides for an exchange, reclassification, or cancellation of issued shares, implementing the amendment if not contained in the amendment itself:	
(if not appl	icdble, indicate N/A)	norma I. Va
see" who	Rehables Agreement for Crossfit Forto	2672,110
30.4 <u>60</u>		
		-
		_
		-
		-

The date of each amendment(s) adoption: 8/1/2013
Effective date if applicable:
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The emendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated June 21, 2013
Signature
(By a director, president or other officer – if directors or officers have not been selected by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Silvia Schillen
(Typed or printed name of person signing)
redicted