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COVER LETTER

NAME OF CORPORATION: DLAB FITNESS TEAM CORF

TO: Amendment Section Division of Corporations

DOCUMENT NUMBER: 1400052504					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
DARIAN ANAICEZ Name of Contact Person DLAB FITNESS TEAM CORP Firm/ Company 7280 NW 7th Street Unit 203 Address Miami FC 331210-2953. City/ State and Zip Code					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Vanessa Conzalez =1,305,987-5977.					
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 Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)					
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301					

'Articles of Amendment

to
Articles of Incorporation

	of
D LAB FITNESS	STEAM CORY.
(Name of Corporation as currently filed with the	e Florida Dept. of State)
+ 1400052E	504
(Document Number of Corporation	(if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, the its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the gorporation:	
NIA	The new
name must be distinguishable and contain the word "corpora: "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	tion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	7280 NW 7 th st
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Unit 203
	Miami, FC 33126-2953
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7280 NW 7495T
(Unit 203
	Miami, FC 33126-2953
D. If amending the registered agent and/or registered office adnew registered agent and/or the new registered office addresses	
	N) A-
Name of New Registered Agent	
(Florida	street address)
New Registered Office Address:	, Florida
(Ci	ty) (Zip Code)
New Registered Agent's Signature, if changing Registered Age	
Thereby accept the appointment as registered agent. I am familia	
Signature of New Registere	d Agent, if changing
	a Agent, y 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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change .		_ N/A	
Add		·	
Remove		1	
2) Change		N/A	
Add		'	
Remove		0 1 / 0	· · · · · · · · · · · · · · · · · · ·
3) Change		_ 1016	
Add		ľ	
Remove		ı	
4) Change		N/A	
Add		1	
Remove		t .	
5) Change		NA	
Add		1	
Remove		h).	
6) Change		- 10/b	
Add		1	
Remove			·

E.	. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
	EIN 47-1154354 Please correcting number Hentification number
_	
_	
_	
F,	If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
	N A.
_	
_	

The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(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 11314	
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)	
DARIAN Alburez.	<u> </u>
(Typed or printed name of person signing)	