Electronic Filing Cover Sheet

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(((H130000418033)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850)222-1092 Fax Number : (850)878-5368

\*\*Enter the email address for this business entity to be used for fature

annual report mailings. Enter only one email address please.\*\*

Email Address:

## REGISTERED AGENT CHANGE L.A. FITNESS - FLORIDA, INC.

Certificate of Status	0
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## **COVER LETTER**

TO:	Amendment Section Division of Corporations		
SUBJ	L.A. FITNESS - FLORIDA, INC.		
00.00	Name of Corporation		
DOCUMENT NUMBER:			
The en	nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.		
	return all correspondence concerning this matter to the following:		
	SHARON CALAHAN		
	Name of Contact Person		
	FITNESS INTERNATIONAL, LLC		
	Pirm/Company		
	3161 MICHELSON DR., STB. 600		
	Address		
	IRVINE, CA 92612		
	City/State and Zip Code		
	SHARONC@FITNESSINTL.COM		
	E-mail address: (to be used for future annual report notification)		
Por fu	rther information concerning this matter, please call:		
	ON CALAHAN 949 255-7307		
	Name of Contact Person Area Code & Daytime Telephone Number		
Enclos	sed is a \$35.00 check made payable to the Department of State.		
	Mailing Address: Amendment Section Division of Corporations  Street Address: Amendment Section Division of Corporations		
	P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301		

CR2B045 (03/12)

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

statement of ch	ne provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this hange is submitted for a corporation organized under the laws of the State of FLORIDA	
in ord	der to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	f the corporation:	_
2. The principa	al office address: L.A. FITNESS - FLORIDA, INC.	-
3. The mailing	address (if different); 3161 MICHELSON DR., STE. 600, IRVINE, CA 92612	-
4. Date of inco	orporation/qualification: 3/25/1997 Document number: P97000026457	<b>-</b> -
5. The name ar Florida Depa	nd street address of the current registered agent and registered office on file with the surment of State: (If resigned, enter resigned)	
	GEORGE A. PINCUS, PROSKAUER ROSS LLP	
	2255 GLADES RD., STE, 340W	
	BOCA RATON, FL 33431 (RESIGNED)	<del>-</del> n
6. The name ar (if changed):	2255 GLADES RD., STE, 340W  BOCA RATON, FL 33431 (RESIGNED)  and street address of the new registered agent (if changed) and /or registered office  C T Corporation System	FILED
	CT Corporation System  C/n CT Corporation System 1200 South Plan Inland Board	
	OF	ا د
	P.O. Box NOT acceptable	
,	Plantation, Florida 33324	
The street address changed will	ress of its registered office and the street address of the business office of its registered agent, ill be identical.	
Such change was authorized by	was authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	
-/A	ROBERT WILSON, SR. VICE PRESIDENT	
	fund of an officer of director	,
I further agree performance o agent. Or, if the hereby confirm	of the appointment as registered agent and agree to act in this capacity, is to complete of a complete of a complete of a complete of my duties, and I am familiar with and accept the obligation of my position as registered instance in the registered office address, I are that the corporation has been notified in writing of this change.	
By: CT	Corporation System 2-21-13	
7	ignature of Registered Agent Date	
vi orRinirR (tr) D	Pehalf of an entity:	
	Yedina Garcia Assistant Secretary  Typed or Printed Name	
	show to a touch (4800)	

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CRZE045 (03/12)