I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DIANE MADSEN CEO

DOCUMENT# P13000076607

Entity Name: NORTH STAR FITNESS CENTERS, INC.

Current Principal Place of Business:

3761 SOUTH NOVA ROAD SUITE E PORT ORANGE, FL 32129

Current Mailing Address:

653 BELLA VISTA EDGEWATER, FL 32141 US

FEI Number: 46-3698318

Name and Address of Current Registered Agent:

MADSEN, PHILIP D 653 BELLA VISTA EDGEWATER, FL 32141 US

Certificate of Status Desired: No

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	DP	Title	DST
Name	MADSEN, PHILIP D	Name	MADSEN, DIANE M
Address	653 BELLA VISTA	Address	653 BELLA VISTA
City-State-Zip:	EDGEWATER FL 32141	City-State-Zip:	EDGEWATER FL 32141

Electronic Signature of Signing Officer/Director Detail

FILED Jan 21, 2018 Secretary of State CC4816330721

Date

Date

01/21/2018