

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000122148

**Entity Name:** BRAIN FITNESS, LLC

**Current Principal Place of Business:**

951 GLENWOOD AVE SE  
#1803  
ATLANTA, GA 30316

**Current Mailing Address:**

951 GLENWOOD AVE SE  
#1803  
ATLANTA, GA 30316 US

**FEI Number:** 26-1558462

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

REICH, JEFFREY P  
951 GLENWOOD AVE SE  
#1803  
ATLANTA, FL 30316 US

*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

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name COBB, MARILYN G  
Address 951 GLENWOOD AVE SE  
#1803  
City-State-Zip: ATLANTA GA 30316

Title MGRM  
Name REICH, JEFFREY P  
Address 951 GLENWOOD AVE SE  
#1803  
City-State-Zip: ATLANTA GA 30316

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JEFFREY REICH

MGRM

03/24/2018

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date