

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000027966

**Entity Name:** OCTOGON SPORTS NUTRITION, LLC

**Current Principal Place of Business:**

1616 WESTGATE CIRCLE  
BRENTWOOD, TN 37027

**Current Mailing Address:**

P.O. BOX 682144  
FRANKLIN, TN 37068 US

**FEI Number: 27-2104076**

**Certificate of Status Desired: No**

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

BRYN & ASSOCIATES, P.A.  
2 SOUTH BISCAYNE BLVD  
2680  
MIAMI, FL 33131 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 PRESCOTT, JEFF  
Address P.O. BOX 682144  
City-State-Zip: FRANKLIN TN 37068

Title MGR  
Name NOELLE, FEDERICO  
Address 4107 CROWNE BROOK CIRCLE  
City-State-Zip: FRANKLIN TN 37067

*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: NOELLE FEDERICO**

**CFO**

**03/21/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date