

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000017029

Entity Name: PRO FIT OPTIX HOLDING COMPANY, LLC**Current Principal Place of Business:**9400 S. DADELAND BLVD
SUITE 600
MIAMI, FL 33156**Current Mailing Address:**14401 BELTWOOD PARKWAY WEST
SUITE 115
FARMERS BRANCH, TX 75244 US**FEI Number:** 45-4793919**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**RA COPORATE SERVICES, INC.
9400 S. DADELAND BLVD.
SUITE 600
MIAMI, FL 33156 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:** JOSEPH BARRY SCHIMMEL

04/28/2016

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR
Name	HAHAMOVITCH, HARRY H
Address	2206 W. ATLANTIC AVENUE, SUITE 201
City-State-Zip:	DELRAY BEACH FL 33445
Title	MGR
Name	POSTERNACK, CHARLES
Address	2901 CLINT MOORE ROAD, SUITE 245
City-State-Zip:	BOCA RATON FL 33496
Title	CFO
Name	BRIGITTE, ROUSSEAU
Address	14401 BELTWOOD PARKWAY WEST 115
City-State-Zip:	FARMERS BRANCH TX 75244

Title	MGR
Name	SCHIMMEL, JOSEPH B
Address	9400 S. DADELAND BLVD SUITE 600
City-State-Zip:	MIAMI FL 33156
Title	MGR
Name	MATTHEW, CEVASCO
Address	14401 BELTWOOD PARKWAY WEST SUITE 115
City-State-Zip:	FARMERS BRANCH TX 75244

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: BRIGITTE ROUSSEAU

CFO

04/28/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date