

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000159534

**Entity Name:** HEROICALLY FIT, LLC

**Current Principal Place of Business:**

14050 BISCAYNE BLVD  
APT. 115  
NORTH MIAMI, FL 33181

**Current Mailing Address:**

14050 BISCAYNE BLVD  
APT. 115  
NORTH MIAMI, FL 33181 US

**FEI Number:** 47-3878396

**Certificate of Status Desired:** Yes

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

DIAZ, MICHAEL JR.  
100 SE 2ND STREET  
34TH FLOOR  
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 MGR  
Name ORTIZ, DAVID A  
Address 14050 BISCAYNE BLVD, APT. 115  
City-State-Zip: NORTH MIAMI FL 33181

*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:** DAVID A ORTIZ

MGR

04/30/2015

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

\_\_\_\_\_  
Date