## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000061583

Entity Name: ISOD CLASSES, LLC

**Current Principal Place of Business:** 

525 TAMIAMI TRAIL, UNIT #5 PORT CHARLOTTE, FL 33953

**Current Mailing Address:** 

525 TAMIAMI TRAIL, UNIT#5 PORT CHARLOTTE. FL 33953 US

FEI Number: 38-4000635 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC. 11380 PROSPERITY FARMS ROAD #221E PALM BEACH GARDENS, FL 33410 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.

Title

Name

Address

City-State-Zip:

**MBR** 

HEALTHY VIRTUE, LLC

525 TAMIAMI TRAIL, UNIT #5

PORT CHARLOTTE FL 33953

SIGNATURE:

Electronic Signature of Registered Agent

Date

FILED May 01, 2017

**Secretary of State** 

CC6870101920

Authorized Person(s) Detail:

Title MBR

Name SAT NAM GROUP LLC

Address 525 TAMIAMI TRAIL, UNIT #5

City-State-Zip: PORT CHARLOTTE FL 33953

Title MGR

Name WILLETTE, JENNIFER

Address 525 TAMIAMI TRAIL, UNIT #5
City-State-Zip: PORT CHARLOTTE FL 33953

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: RENAY F. BLOOM

ATTORNEY-IN-FACT

05/01/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date