## 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000084617

**Entity Name: WORKOUTPEDERSEN LLC** 

**Current Principal Place of Business:** 

1101 BRICKELL AVENUE SUITE G0 #310367 MIAMI, FL 33231

**Current Mailing Address:** 

1101 BRICKELL AVENUE SUITE G0 #310367 MIAMI, FL 33231 US

FEI Number: 61-1792911 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCORP SERVICES, INC. 3458 LAKESHORE DRIVE TALLAHASSEE, FL 32312 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

FILED Apr 03, 2023

**Secretary of State** 

7021393118CC

Authorized Person(s) Detail:

Title AMBR Title AMBR

Name PEDERSEN, CHELINA L Name REKALOS, ANDERS

Address ROBERT JACOBSENS VEJ 44F Address ROBERT JACOBSENS VEJ 44F

City-State-Zip: COPENHAGEN S 02300 City-State-Zip: COPENHAGEN S 02300

Title AMBR

Name PEDERSEN, MIKAEL

Address ROBERT JACOBSENS VEJ 16F 1.2

City-State-Zip: COPENHAGEN S 02300

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: CHELINA LILA PEDERSEN

Electronic Signature of Signing Authorized Person(s) Detail

**MRS** 

04/03/2023