

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000051377

Entity Name: PURLIFE FITNESS LLC

Current Principal Place of Business:

9 PLAZA REAL SOUTH
SUITE 111
BOCA RATON, FL 33432

Current Mailing Address:

9 PLAZA REAL SOUTH
SUITE 111
BOCA RATON, FL 33432 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TOMKO, TRAVIS D
45 NE 2ND AVE
DELRAY BEACH, FL 33444 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 PURLIFE FITNESS GROWTH
PARTNERS LLC
Address 45 NE 2ND AVE
City-State-Zip: DELRAY BEACH FL 33444

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: TRAVIS TOMKO

MGR

02/26/2019

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date