

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000056131

Entity Name: HOPPERFIT LLC

Current Principal Place of Business:

931 VILLAGE BLVD., STE. #905-505
WEST PALM BEACH, FL 33409

Current Mailing Address:

931 VILLAGE BLVD., STE. #905-505
WEST PALM BEACH, FL 33409 US

FEI Number: 82-0843159

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

FLORIDA FILING & SEARCH SERVICES, INC.
155 OFFICE PLAZA DRIVE
SUITE A
TALLAHASSEE, FL 32301 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 AUTHORIZED MEMBER, DIRECTOR
OF BUSINESS DEVELOPMENT
Name ADENIYI, OLANREWAJU A
Address 22304 GLENMOOR DRIVE
City-State-Zip: WEST PALM BEACH FL 33409

Title AUTHORIZED MEMBER, DIRECTOR
OF TECHNOLOGY
Name SYLVESTER, DIONEL
Address 2649 RAVELLA LANE,
City-State-Zip: PBG FL 33410

Title AUTHORIZED MEMBER, DIRECTOR
OF FINANCE & BUSINESS STRATEGY
Name BOSWELL , TRAVIS
Address 1118 E MOWRY DRIVE #204
City-State-Zip: HOMESTEAD FL 33030

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: OLANREWAJU ADENIYI

**AUTHORIZED MEMBER,
DIRECTOR OF BUSINESS
DEVELOPMENT**

03/07/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date