

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000103904

**Entity Name:** DESIGN YOUR HEALTHY LIFESTYLE, LLC

**Current Principal Place of Business:**

4611 ACKERLY WAY  
BRANDON, FL 33511

**Current Mailing Address:**

4611 ACKERLY WAY  
BRANDON, FL 33511 US

**FEI Number: 82-1541492**

**Certificate of Status Desired: No**

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

DELGADO, GARY E  
4611 ACKERLY WAY  
BRANDON, FL 33511 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	AMBR	Title	AMBR
Name	DELGADO, CHRISTA S	Name	DELGADO, GARY E
Address	4611 ACKERLY WAY	Address	4611 ACKERLY WAY
City-State-Zip:	BRANDON FL 33511	City-State-Zip:	BRANDON FL 33511

*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: GARY DELGADO**

**AMBR**

**01/26/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date