2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2019
Secretary of State
9555573388CC

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Entity Name: LYFESTYLE FYTNESS & BEHAVIORAL REHAB THERAPY LLC

Current Principal Place of Business:

2640 N.W. 44TH AVENUE
LAUDERHILL, FL 33313

Current Mailing Address:

2640 N.W. 44TH AVENUE
LAUDERHILL, FL 33313

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KENYON, BRENTON
2640 N.W. 44TH AVENUE
LAUDERHILL, FL 33313 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	KENYON, BRENTON
Address	2640 N.W. 44TH AVENUE
City-State-Zip:	LAUDERHILL FL 33313

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: BRENTON KENYON MANAGER 04/26/2019

Electronic Signature of Signing Authorized Person(s) Detail — Date