

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000256807

**Entity Name:** LEYVA GYMNASTICS CLINIC, LLC

**Current Principal Place of Business:**

14251 SW 120TH ST  
104  
MIAMI, FL 33186

**Current Mailing Address:**

14251 SW 120TH ST  
104  
MIAMI, FL 33186

**FEI Number:** 84-4036358

**Certificate of Status Desired:** Yes

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

SOIFER, MAX B  
14251 SW 120TH  
104  
MIAMI, FL 33186 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 LEYVA, DANELL J  
Address 1338 GORDON ST #101  
City-State-Zip: LOS ANGELES CA 90028

Title MANAGER  
Name SOIFER, MAX BENNETT  
Address 2920 N. 25TH ST.  
City-State-Zip: TACOMA WA 98406

*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:** MAX BENNETT SOIFER

**REGISTERED AGENT**

**01/02/2020**

Electronic Signature of Signing Authorized Person(s) Detail

Date