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.

MANGER

SIGNATURE: WRIGHT BRADY

Electronic Signature of Signing Authorized Person(s) Detail

Entity Name: TRIPLE O G BRAIN AND BODY JUICE LLC

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Current Principal Place of Business:

300 WHISPERING WOODS LN., APT 16 ST AUGUSTINE, FL 32084

DOCUMENT# L21000118815

Current Mailing Address:

300 WHISPERING WOODS LN., APT 16 ST AUGUSTINE. FL 32084 US

FEI Number: 86-3545018

Name and Address of Current Registered Agent:

BRADY, WRIGHT 300 WHISPERING WOODS LN., APT 16 ST AUGUSTINE, FL 32084 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

Authorized Person(s) Detail :

Title	AMBR	Title	MANAGER
Name	BRADY, WRIGHT	Name	IRVIN, KELVIN
Address	300 WHISPERING WOODS LN., APT 16	Address	7816 MANOR FOREST LANE
City-State-Zip:	ST AUGUSTINE FL 32084	City-State-Zip:	BOYNTON BEACH FL 33436

FILED Jun 26, 2022 Secretary of State 9759793954CC

Certificate of Status Desired: No

06/26/2022 Date

Date