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.

MGR

SIGNATURE: LISA PUMPER

Electronic Signature of Signing Authorized Person(s) Detail

Electronic Signature of Registered Agent

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:

Authorized Person(s) Detail : Title MGR Title MGR PUMPER, SCOTT D Name PUMPER, LISA M Name 1218 PONCE DE LEON DR Address 1218 PONCE DE LEON DR Address City-State-Zip: FORT LAUDERDALE FL 33316

Current Mailing Address:

DOCUMENT# L21000124575

1218 PONCE DE LEON DR FORT LAUDERDALE, FL 33316

1218 PONCE DE LEON DR FORT LAUDERDALE, FL 33316

Current Principal Place of Business:

FEI Number: 87-2823956

Name and Address of Current Registered Agent:

Entity Name: YOGA COMMUNITY OF FLORIDA, LLC

PUMPER, LISA M 1218 PONCE DE LEON DR FORT LAUDERDALE, FL 33316 US

FILED Apr 13, 2023 Secretary of State 6614404521CC

Date

Certificate of Status Desired: Yes

City-State-Zip: FORT LAUDERDALE FL 33316

04/13/2023

Date