SIGNATURE: GLADYS DUPUY PRESIDENT

Electronic Signature of Signing Authorized Person(s) Detail

DUPUY, GLADYS 4100 SW 64TH AVE STE 102 DAVIE, FL 33314 US

Authorized Person(s) Detail :							
Title	MGR	Title	MGR				
Name	CREVECOEUR, EDSON	Name	JANVIER, JOELLE				
Address	4100 SW 64TH AVE STE 102	Address	4100 SW 64TH AVE STE 102				
City-State-Zip:	DAVIE FL 33314	City-State-Zip:	DAVIE FL 33314				
Title	MBR						
Name	DUPUY, GLADYS						
Address	4100 SW 64TH AVE STE 102						

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.

DOCUMENT# L21000197227

Entity Name: WETA FIT STUDIO, LLC

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Current Principal Place of Business:

4100 SW 64TH AVE STE 102 DAVIE, FL 33314

Current Mailing Address:

4100 SW 64TH AVE STE 102 DAVIE, FL 33314 US

FEI Number: 86-3595098

Name and Address of Current Registered Agent:

SIGNATURE: Electronic Signature of Registered Agent

Authorized Pe	rson(s) Detail :
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Address	4100 SW 64TH AVE STE 102	Address	4100 SW 64TH AVE STE 102
City-State-Zip:	DAVIE FL 33314	City-State-Zip:	DAVIE FL 33314
Title	MBR		
Name	DUPUY, GLADYS		
Address	4100 SW 64TH AVE STE 102		
City-State-Zip:	DAVIE FL 33314		

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.

FILED Jan 28, 2022 Secretary of State 7313715930CC

01/28/2022

Date

Certificate of Status Desired: No