

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000491256

**Entity Name:** FITNESSBYJUDITHRAMOS LLC

**Current Principal Place of Business:**

3004 SW 20TH ST  
205C  
OCALA, FL 34474

**Current Mailing Address:**

3004 SW 20TH ST  
205C  
OCALA, FL 34474

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

RAMOS VALDES, YUDITH  
3004 SW 20TH ST  
205C  
OCALA, FL 34474 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            AMBR  
Name            RAMOS VALDES, YUDITH  
Address        3004 SW 20TH ST  
City-State-Zip: Ocala FL 34474

*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:** YUDITH RAMOS VALDES

**CEO/ OWNER**

**02/07/2024**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date