## 2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M18000001843

Entity Name: VITALSMARTS, LC., LLC

**Current Principal Place of Business:** 

320 RIVER PARK DRIVE SUITE SWB

PROVO, UT 84604

**Current Mailing Address:** 

320 RIVER PARK DRIVE

SUITE SWB

PROVO, UT 84604 US

FEI Number: 87-0664848 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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:

Address

Electronic Signature of Registered Agent

Date

**FILED** Feb 13, 2024

**Secretary of State** 

2554848041CC

Authorized Person(s) Detail:

SUITE 100

Title MANAGER Title **MANAGER** 

GILES. TROY SHIMBERG, ANDREW Name Name

Address 282 RIVER BEND LANE Address 282 RIVER BEND LANE

SUITE 100

**PROVO UT 84604 PROVO UT 84604** City-State-Zip: City-State-Zip:

Title **MANAGER** Title **MEMBER** 

GRENNY, JOSEPH VS PROFESSIONAL TRAINING Name Name

ACQUISITION, LLC

282 RIVER BEND LANE Address 282 RIVER BEND LANE SUITE 100

SUITE 100

**PROVO UT 84604** City-State-Zip: City-State-Zip: **PROVO UT 84604** 

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.

02/13/2024 SIGNATURE: TROY GILES MANAGER