## 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L02000011468

City-St-Zip:

Entity Name: KJ FITNESS MANAGEMENT, LLC

ALTAMONTE SPRINGS, FL 32714

FILED Sep 30, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 733 WEST STATE ROAD 436 #2002 ALTAMONTE SPRINGS, FL 32714 **Current Mailing Address: New Mailing Address:** 733 WEST STATE ROAD 436 #2002 ALTAMONTE SPRINGS, FL 32714 FEI Number: 01-0700146 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KAHN, JEROME B 733 WEST STATE ROAD 436 #2002 ALTAMONTE SPRINGS, FL 32714 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: JEROME B. KAHN Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete KAHN, JEROME Name: Name: Address: 2102 ROYAL FERN CT Address: City-St-Zip: LONGWOOD, FL 32779 City-St-Zip: Title: ( ) Delete Title: () Change () Addition JACONETTI, GEORGE W Name: Name: Address: 733 W STATE RD #936 STE 201 Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: JEROME B. KAHN PRES 09/30/2009