

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000002381

**FILED**  
**Dec 03, 2010**  
**Secretary of State**

**Entity Name:** CROSSFIT HARDBODIES LLC

**Current Principal Place of Business:**

446 LAKE WHITNEY PLACE B-1 E-5  
LAKE WHITNEY BUSINESS PARK  
PORT ST LUCIE, FL 34986

**New Principal Place of Business:**

**Current Mailing Address:**

446 LAKE WHITNEY PLACE B-1 E-5  
LAKE WHITNEY BUSINESS PARK  
PORT ST LUCIE, FL 34986

**New Mailing Address:**

**FEI Number:** 26-4008633

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SANTOS, EDSON  
446 LAKE WHITNEY PLACE B-1 E-5  
LAKE WHITNEY BUSINESS PARK  
PORT ST LUCIE, FL 34986 US

**Name and Address of New 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:** EDSON SANTOS

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** SANTOS, EDSON  
**Address:** 220 NW PLEASANT GROVE WAY  
**City-St-Zip:** PORT ST LUCIE, FL 34986 US

**Title:** MGRM  
**Name:** SANTOS, FORTUNE  
**Address:** 220 NW PLEASANT GROVE WAY  
**City-St-Zip:** PORT ST LUCIE, FL 34986 US

I hereby 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:** EDSON SANTOS

MGRM

12/03/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date