

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000082052

Entity Name: TENACITY FITNESS, LLC.

**FILED**  
**Mar 11, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

14058 SUMMER BREEZE DRIVE, EAST  
JACKSONVILLE, FL 32218

**New Principal Place of Business:**

6313 ARLINGTON RD.  
JACKSONVILLE, FL 32211

**Current Mailing Address:**

14058 SUMMER BREEZE DRIVE, EAST  
JACKSONVILLE, FL 32218

**New Mailing Address:**

6313 ARLINGTON RD.  
JACKSONVILLE, FL 32211

FEI Number: 27-0797476

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FIELDER, RALPH T  
14058 SUMMER BREEZE DRIVE, EAST  
JACKSONVILLE, FL 32218 US

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

FIELDER, RALPH T  
6313 ARLINGTON RD.  
JACKSONVILLE, FL 32218 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: RALPH T. FIELDER

03/11/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: FIELDER, RALPH T  
Address: 6313 ARLINGTON RD  
City-St-Zip: JACKSONVILLE, FL 32211 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: RALPH T. FIELDER

MGR.

03/11/2011

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