

# 2013 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L11000055477

**FILED**  
**Mar 08, 2013**  
**Secretary of State**

**Entity Name:** HYPOLITE FIT LLC

**Current Principal Place of Business:**

143 SOUTHERN PECAN CIRCLE  
208  
WINTER GARDEN, FL 34787

**New Principal Place of Business:**

1118 BRICK RD  
WINTER GARDEN, FL 34787

**Current Mailing Address:**

143 SOUTHERN PECAN CIRCLE  
208  
WINTER GARDEN, FL 34787

**New Mailing Address:**

1118 BRICK RD  
WINTER GARDEN, FL 34787

**FEI Number:** 80-0720862

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

HYPOLITE, TREVOR P  
143 SOUTHERN PECAN CIRCLE  
208  
WINTER GARDEN, FL 34787 US

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

HYPOLITE, TREVOR P  
1118 BRICK RD  
WINTER GARDEN, FL 34787 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: TREVOR HYPOLITE

03/08/2013

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: HYPOLITE, TREVOR P  
Address: 1118 BRICK RD  
City-St-Zip: WINTER GARDEN, FL 34787

Title: MGR  
Name: HYPOLITE, TAMISHA E  
Address: 1118 BRICK RD  
City-St-Zip: WINTER GARDEN, FL 34787

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: TREVOR HYPOLITE

MGR

03/08/2013

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