

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L12000118546

**FILED**  
**Oct 07, 2013**  
**Secretary of State**

**Entity Name:** OXYGEN FITNESS INTERNATIONAL LLC

**Current Principal Place of Business:**

429 N FEDERAL HWY  
POMPAÑO BEACH, FL 33062 US

**New Principal Place of Business:**

**Current Mailing Address:**

10 HARBORAGE ISLE  
FORT LAUDERDALE, FL 33316 US

**New Mailing Address:**

429 N FEDERAL HWY  
POMPAÑO BEACH, FL 33062 US

**FEI Number:** 46-1026567

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KUSHNER, MANUEL  
777 S FLAGLER DRIVE  
#900W  
WEST PALM BEACH, FL 33401 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:** MANUEL KUSHNER

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** WITTENBERNS, COURTNEY N  
**Address:** 10 HARBORAGE ISLE  
**City-St-Zip:** FORT LAUDERDALE, FL 33316 US

**Title:** MGR  
**Name:** WITTENBERNS, ROGER  
**Address:** 10 HARBORAGE ISLE  
**City-St-Zip:** FORT LAUDERDALE, FL 33316 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:** C. WITTENBERNS

MGR

10/07/2013

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