

# 2014 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L12000132821

Entity Name: HANDS ON FITNESS, LLC

FILED  
Apr 05, 2014  
Secretary of State

**Current Principal Place of Business:**

115 MAGNOLIA AVE  
FORT WALTON BEACH, FL 32548

**New Principal Place of Business:**

**Current Mailing Address:**

115 MAGNOLIA AVE  
FORT WALTON BEACH, FL 32548

**New Mailing Address:**

FEI Number: 61-1695479

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WYATT, KRISTEN L  
115 MAGNOLIA AVE  
FORT WALTON BEACH, FL 32548 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: KRISTEN WYATT

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**AUTHORIZED PERSONS:**

Title: PRES  
Name: WYATT, KRISTEN L  
Address: 115 MAGNOLIA AVE  
City-St-Zip: FORT WALTON BEACH, FL 32548

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 authorized to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: KRISTEN WYATT

\_\_\_\_\_  
Electronic Signature of Authorized Person

PRES

04/05/2014

\_\_\_\_\_  
Date