

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000031530

FILED
Oct 08, 2009
Secretary of State

Entity Name: ROCK FITNESS, INC.

Current Principal Place of Business:

343 N.W. COLE TERRACE
SUITE 107
LAKE CITY, FL 32055

New Principal Place of Business:

1191 SW BASCOM NORRIS DRIVE
SUITE 103
LAKE CITY, FL 32025

Current Mailing Address:

343 N.W. COLE TERRACE
SUITE 107
LAKE CITY, FL 32055

New Mailing Address:

1191 SW BASCOM NORRIS DRIVE
SUITE 103
LAKE CITY, FL 32025

FEI Number: 38-3779983

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LINTON, MICAH
343 N.W. COLE TERRACE
SUITE 107
LAKE CITY, FL 32055 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: MICAH LINTON

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P, D () Delete
Name: LINTON, MICAH
Address: 343 N.W. COLE TERRACE, SUITE 107
City-St-Zip: LAKE CITY, FL 32055 US

Title: S, T () Delete
Name: DUNN, LEAH
Address: 343 N.W. COLE TERRACE, SUITE 107
City-St-Zip: LAKE CITY, FL 32055 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S, T (X) Change () Addition
Name: DUNN, LEAH
Address: 1191 SW BASCOM NORRIS DRIVE
City-St-Zip: LAKE CITY, FL 32025 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LEAH DUNN

Electronic Signature of Signing Officer or Director

S VP

10/08/2009

Date