

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000096681

**Entity Name:** HOUSE OF STRENGTH LLC

**Current Principal Place of Business:**

3324 W. UNIVERSITY AVENUE  
113  
GAINESVILLE, FL 32607

**Current Mailing Address:**

3324 W. UNIVERSITY AVENUE  
113  
GAINESVILLE, FL 32607

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

MARK, TRAVIS  
3324 WEST UNIVERSITY AV.  
113  
GAINESVILLE, FL 32607 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:**

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

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name TRAVIS, JUDY  
Address 3324 W. UNIVERSITY AVENUE #113  
City-State-Zip: GAINESVILLE FL 32607

*I hereby 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 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JUDY TRAVIS

MGR

02/21/2013

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date