## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000062541

Entity Name: TWISTED FITNESS L.L.C.

**Current Principal Place of Business:** 

7300 BISCAYNE BLVD. SUITE 100 MIAMI, FL 33138 Jan 09, 2014 Secretary of State CC4038348815

**FILED** 

## **Current Mailing Address:**

7300 BISCAYNE BLVD. SUITE 100 MIAMI, FL 33138

FEI Number: 90-0587144 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

IRONFLOWER FITNESS 7300 BISCAYNE BLVD SUITE 100 MIAMI, FL 33138 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 Title MGRM

NameJIGGINS, JAY LNameALFARO, PATRICIAAddress880 NE 72ND TERRACE,Address11403 NE 8TH AVENUE

**BISCAYNE PARK** 

City-State-Zip: MIAMI FL 33138

City-State-Zip: MIAMI FL 33161

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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JAY JIGGINS MANAGING MEMBER 01/09/2014