

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000058840

**Entity Name:** CITY YOGA, LLC

**Current Principal Place of Business:**

2225 A1A SOUTH  
SUITE B 6-8  
ST AUGUSTINE, FL 32080

**Current Mailing Address:**

2225 A1A SOUTH  
SUITE B8  
ST AUGUSTINE, FL 32080

**FEI Number:** 46-0872142

**Certificate of Status Desired:** No

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

SUNDERMAN, JACOB  
141 MARSH ISLAND CIR  
ST AUGUSTINE, FL 32095 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 SUNDERMAN, ALLYSON  
Address 141 MARSH ISLAND CIR.  
City-State-Zip: ST AUGUSTINE FL 32095

Title MGRM  
Name SUNDERMAN, JACOB  
Address 141 MARSH ISLAND CIR  
City-State-Zip: ST AUGUSTINE FL 32095

*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:** ALLYSON SUNDERMAN

MGRM

03/18/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date