

2016 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 B6
ST AUGUSTINE, FL 32080 US

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

Title MGRM
Name CONARD, CHELSEA JO
Address 40 LOUISVILLE DR
City-State-Zip: PALM COAST FL 32137

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

04/30/2016

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date