

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000023226

**Entity Name:** FITLIFE FOODS FRANCHISING, LLC

**Current Principal Place of Business:**

1810 W. KENNEDY BLVD.  
TAMPA, FL 33606

**Current Mailing Address:**

PO BOX 21301  
TAMPA, FL 33622 US

**FEI Number:** 46-2375262

**Certificate of Status Desired:** No

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

ROBBINS, MICHAEL H  
C/O SHUMAKER, LOOP & KENDRICK, LLP  
101 E. KENNEDY BLVD., STE. 2800  
TAMPA, FL 33602 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 MGR  
Name OSTERWEIL, DAVID  
Address 1810 W. KENNEDY BLVD.  
City-State-Zip: TAMPA FL 33606

*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:** DAVID OSTERWEIL

MANAGER

04/12/2017

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

\_\_\_\_\_ Date