

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000004746

Entity Name: CYCOLOGY COACHING SOLUTIONS, LLC

Current Principal Place of Business:

11019 BENTWOOD CT
NEW PORT RICHEY, FL 34654

Current Mailing Address:

11019 BENTWOOD CT
NEW PORT RICHEY, FL 34654 US

FEI Number: 46-4495844

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROMAN, MARK S
2360 CONGRESS AVENUE
CLEARWATER, FL 33763 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 AR
Name FOUT, WILLIAM Z
Address 11019 BENTWOOD CT
City-State-Zip: NEW PORT RICHEY FL 34654

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: WILLIAM Z. FOUT

OWNER

02/23/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date