

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000149995

Entity Name: CLUB HEALTHY LIFE LLC

Current Principal Place of Business:

1940 SUWANEE AVE
FORT MYERS, FL 33901

Current Mailing Address:

1669 S MAYFAIR RD
FORT MYERS, FL 33919

FEI Number: 47-1928394

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALVAREZ, CLAUDIA C
1669 S MAYFAIR RD
FORT MYERS, FL 33919 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 AP
Name ALVAREZ, RAMON P
Address 1669 S MAYFAIR RD
City-State-Zip: FORT MYERS FL 33919

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: RAMON P ALVAREZ

OFFICER

05/01/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date