

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000194367

**Entity Name:** ERGOTHINX LLC

**Current Principal Place of Business:**

17917 SW 8TH STREET  
PEMBROKE PINES, FL 33029

**Current Mailing Address:**

17917 SW 8TH STREET  
PEMBROKE PINES, FL 33029 US

**FEI Number:** 47-2626876

**Certificate of Status Desired:** No

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

ACEVEDO & ASSOCIATES LLP  
1395 BRICKELL AVENUE 8TH FLOOR  
MIAMI, FL 33131 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           MANAGER  
Name           GOJMAN, Yael  
Address       17917 SW 8TH STREET  
City-State-Zip: PEMBROKE PINES FL 33029

*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:** Yael Gojman

**MANAGER**

**02/17/2016**

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

\_\_\_\_\_  
Date