

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000028453

Entity Name: THE MUSCLE PHD LLC

Current Principal Place of Business:

5850 W CYPRESS ST.
SUITE B
TAMPA, FL 33607

Current Mailing Address:

370 WEST PLEASANTVIEW AVE
STE. 345
HACKENSACK, NJ 07601 US

FEI Number: 81-1727492

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BEELER, SAM A COO
5850 W CYPRESS ST
SUITE B
TAMPA, FL 33607 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: SAM A BEELER

04/29/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name BEELER, SAM A
Address 370 WEST PLEASANTVIEW AVE
STE. 345
City-State-Zip: HACKENSACK NJ 07601

Title AMBR
Name WILSON, JACOB M DR.
Address 110 S.MATANZAS AVENUE
City-State-Zip: TAMPA FL 33609

Title AMBR
Name LOWERY, RYAN P
Address 2006 S.CAROLINA AVE., APT.#3
City-State-Zip: TAMPA FL 33629

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: SAM A BEELER

AMBR

04/29/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date