

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000101614

Entity Name: JUICE HABIT, LLC

Current Principal Place of Business:

717 CORTEZ AVENUE
BELLEAIR BLUFFS, FL 33770

Current Mailing Address:

717 CORTEZ AVE
BELLEAIR BLUFFS, FL 33770

FEI Number: 81-2764607

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FITZGERALD, ERIN
717 CORTEZ AVE
BELLEAIR BLUFFS, FL 33770 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 FITZGERALD, ERIN
Address 717 CORTEZ AVE
City-State-Zip: BELLEAIR BLUFFS FL 33770

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: ERIN FITZGERALD

MANAGER

02/11/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date