

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000106021

**Entity Name:** PURE VITALITY LLC

**Current Principal Place of Business:**

9310 US HIGHWAY 192  
SUITE 4  
CLERMONT, FL 34714

**Current Mailing Address:**

9310 US HIGHWAY 192  
SUITE 4  
CLERMONT, FL 34714

**FEI Number:** 82-1560851

**Certificate of Status Desired:** No

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

CLOUD ACCOUNTING SERVICES INC.  
9310 US HIGHWAY 192  
STE 4  
CLERMONT, FL 34714 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 PR  
Name FRANCIS, CHARLES  
Address 9310 US HIGHWAY 192 STE 4  
City-State-Zip: CLERMONT FL 34714

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:** CHARLES FRANCIS

PRESIDENT

03/20/2018

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

\_\_\_\_\_  
Date