

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000228759

**Entity Name:** MAX EFFORT FITNESS LLC**Current Principal Place of Business:**4910 SW 201 TERR  
SOUTHWEST RANCHES, FL 33332**Current Mailing Address:**20851 JOHNSON ST, STE 120  
PEMBROKE PINES, FL 33029 US**FEI Number:** 82-3235312**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MACHADO, SAMANTHA  
20851 JOHNSON ST  
STE 120  
PEMBROKE PINES, FL 33029 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:** SAMANTHA MACHADO

03/08/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                            |                 |                            |
|-----------------|----------------------------|-----------------|----------------------------|
| Title           | MGR                        | Title           | MGR                        |
| Name            | DE LA NUEZ, ROBERTO        | Name            | MACHADO, ANGEL E           |
| Address         | 20851 JOHNSON ST #120      | Address         | 4910 SW 201 TERR           |
| City-State-Zip: | PEMBROKE PINES FL 33029    | City-State-Zip: | SOUTHWEST RANCHES FL 33332 |
|                 |                            |                 |                            |
| Title           | MGR                        |                 |                            |
| Name            | MACHADO, SAMANTHA          |                 |                            |
| Address         | 4910 SW 201 TERRACE        |                 |                            |
| City-State-Zip: | SOUTHWEST RANCHES FL 33332 |                 |                            |

*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:** SAMANTHA MACHADO

MANAGER

03/08/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date