

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000053519

**Entity Name:** ELEV8-NUTRITION LLC

**Current Principal Place of Business:**

4911 NW 55TH PLACE  
TAMARAC, FL 33319

**Current Mailing Address:**

4911 NW 55TH PLACE  
TAMARAC, FL 33319 US

**FEI Number:** 83-3893511

**Certificate of Status Desired:** No

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

UNITED STATES CORPORATION AGENTS, INC.  
5575 S. SEMORAN BLVD  
SUITE 36  
ORLANDO, FL 32822 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	AMBR	Title	AMBR
Name	SANTOYO, ODELADY	Name	SANTOYO, JOHAN
Address	4911 NW 55TH PLACE	Address	4911 NW 55TH PLACE
City-State-Zip:	TAMARAC FL 33319	City-State-Zip:	TAMARAC FL 33319

*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:** ODELADY SANTOYO

03/13/2020

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

\_\_\_\_\_  
Date