

2020 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L19000203242

Entity Name: STEFFON VITALITY, LLC.

Current Principal Place of Business:

1888 CRAFTON RD
NORTH PALM BEACH, FL 33408

Current Mailing Address:

1888 CRAFTON RD.
NORTH PALM BEACH, FL 33408 US

FEI Number: 84-3951939

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

STEFFON, CONNIE
1888 CRAFTON RD.
NORTH PALM BEACH, FL 33408 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 MEMBER MANAGER
Name STEFFON, CONNIE
Address 1888 CRAFTON RD.
City-State-Zip: NORTH PALM BEACH FL 33408

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: CONNIE STEFFON

MANAGER

04/07/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date