

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000116731

Entity Name: J.A.M HEALTH & FITNESS LLC**Current Principal Place of Business:**405 PLAZA REAL
BOCA RATON, FL 33432**Current Mailing Address:**2228 NE 26TH ST
LIGHTHOUSE POINT, FL 33064 US**FEI Number:** 85-0943156**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JAM HEALTH & FITNESS LLC
405 PLAZA REAL
BOCA RATON, FL 33432 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:** KASSANDRA LOWER

02/17/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MANAGER
Name	LOWER, KASSANDRA
Address	2228 NE 26TH STREET
City-State-Zip:	LIGHTHOUSE POINT FL 33064

Title	MANAGER
Name	LOWER, KASSANDRA
Address	2253 BLOODS GROVE CIRCLE
City-State-Zip:	DELRAY BEACH FL 33445

Title	AUTHORIZED MEMBER
Name	PARTRIDGE, CHRISTOPHER
Address	2228 NE 26TH ST
City-State-Zip:	LIGHTHOUSE POINT FL 33064

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: KASSANDRA LOWER

MANAGER

02/17/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date