

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000357175

Entity Name: 355 HOLISTIC FITNESS LLC**Current Principal Place of Business:**10705 CROSSCUT DR
PENSACOLA, FL 32506**Current Mailing Address:**10705 CROSSCUT DR
PENSACOLA, FL 32506**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MCKINNEY, TAMMY G
10705 CROSSCUT DR
PENACOLA, FL 32506 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	MANAGER
Name	MCKINNEY, TAMMY G
Address	10705 CROSSCUT DR
City-State-Zip:	PENSACOLA FL 32506

Title	AR
Name	MCKINNEY, OTIS JR
Address	10705 CROSSCUT DR
City-State-Zip:	PENSACOLA FL 32506

Title	AMBR
Name	MCKINNEY, MASHIYA M
Address	10705 CROSSCUT DR
City-State-Zip:	PENSACOLA FL 32506

Title	AMBR
Name	MCKINNEY, HANNAH R
Address	10705 CROSSCUT DR
City-State-Zip:	PENSACOLA FL 32506

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: TAMMY G MCKINNEY

MANAGER

04/25/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date