2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 12, 2024
Secretary of State
9682503619CC

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Entity Name: ELEVATE HEALTH CLUB LLC

Current Principal Place of Business:

2111 W.SWANN AVENUE SUITE 104
TAMPA, FL 33606

Current Mailing Address:

2111 W.SWANN AVENUE SUITE 104
TAMPA, FL 33606 US

FEI Number: 87-4735948

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OLIVERI, CONNOR
2111 W. SWANN AVE
STE 104
TAMPA, FL 33606 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	MGR
Name	OLIVERI, CONNOR
Address	2916 W. BAY VISTA AVE. APT # 3
City-State-Zip:	TAMPA FL 33611

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: CONNOR J. OLIVERI MANAGER/OWNER 02/12/2024

Electronic Signature of Signing Authorized Person(s) Detail — Date