#### 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000437544

Entity Name: W2 FITNESS SOLUTIONS L.L.C

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# **Current Principal Place of Business:**

9400 ATLANTIC BLVD SUITE 95 JACKSONVILLE, FL 32211

# **Current Mailing Address:**

2652 SUNRISE RIDGE LN JACKSONVILLE, FL 32211 US

FEI Number: 92-0699056 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

WHITE, WILL M 2652 SUNRISE RIDGE LN JACKSONVILLE, FL 32211 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

FILED Apr 03, 2023

**Secretary of State** 

9412409449CC

# Authorized Person(s) Detail:

SIGNATURE: WILL M WHITE

Title MGR

Name WHITE, WILL M

Address 2652 SUNRISE RIDGE LANE
City-State-Zip: JACKSONVILLE FL 32211

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.

**OWNER** 

Electronic Signature of Signing Authorized Person(s) Detail

04/03/2023 Date