

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000022443

Entity Name: LOVE FIT HEALTH & WELLNESS, LLC

Current Principal Place of Business:

1326 TUSCALOOSA TRCE
TALLAHASSEE, FL 32305

Current Mailing Address:

1326 TUSCALOOSA TRCE
TALLAHASSEE, FL 32305 US

FEI Number: 92-1663123

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HIGHMAN, SARAH F
187 ANDORA STREET
SAINT AUGUSTINE, FL 32086 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 CEO
Name WHITE, SHERIKA
Address 1326 TUSCALOOSA TRCE
City-State-Zip: TALLAHASSEE FL 32305

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: WHITE, SHERIKA

CEO

01/20/2024

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date