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Colorado Secretary of State

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Periodic Report

filed pursuant to §7-90-301, et seq. and §7-90-501 of the Colorado Revised Statutes (C.R.S)

ID number:	20041371967			
Entity name:	Optimal Fitness, LLC			
Jurisdiction under the law of which the entity was formed or registered:	Colorado			
Principal office street address:	12837 W Adriatic Ave			
	Lakewood (Street name and number)			
	Lakewood	СО	80228	
	(City)	(State) United	(Postal/Zip Code) States	
	(Province – if applicable) (Country – if not US)			
2. Principal office mailing address: (if different from above)	12837 W Adriatic Ave	e		
	(Street name and number or Post Office Box information) Lakewood			
	Lakewood	СО	80228	
	(City)	(State) United	(Postal/Zip Code) States	
	(Province – if applicable) (Country – if not US)			
3. Registered agent name: (if an individual)	Cunningham F	Perri	<u>L</u>	
	(Last)	(First)	(Middle) (Suffix)	
or (if a business organization)				
4. The person identified above as registere	d agent has consented to be	ing so appoint	ted.	
5. Registered agent street address:	12837 W Adriatic Ave)		
3. Registered agent street address.	(Street name and number)			
	Lakewood	CO	80228	
	(City)	(State)	(Postal/Zip Code)	
6. Registered agent mailing address: (if different from above)	12837 W Adriatic Ave			
	(Street name and number or Post Office Box information) Lakewood			
	Lakewood	СО	80228	
	(City)	United St	(Postal/Zip Code) ates	
	$(Province - if applicable) \qquad \overline{(Country - if not US)}$			

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be delivered for filing:	Cunningham	Perri				
	(Last)	(First)	(Middle) (Suffix)			
	12837 W Adriatic Ave					
	(Street name and	(Street name and number or Post Office Box information)				
	Lakewood	CO 80228	CO 80228			
	(City)	United States				
	(Province – if applicable)	(Country – if not US)				
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of any additional individuals causing the aname and address of such individuals.)	locument to be delivered for filing, mark	this box and include a	ın attachment stating the			

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