State of Rhode Island and Providence Plantations Department of State - Business Services Division	
Annual Report for the year: 2016 Limited Liability Company	
 → Filing period: September 1 - November 1 → Filing Fee: \$50.00 → Penalty: Additional \$25.00 fee if form is not filed by December 1. 	

1. Entity ID Number	2 Event n	omo of the Limit	and Linkstein Comments				
	Z. EXACTI	2. Exact name of the Limited Liability Company					
329459		New Body Fitness, LLC					
3. NAICS Code	4. Brief de	4. Brief description of the character of business conducted in Rhode Island					
62	Perso	Personal body training					
5. State of Formation							
RI							
6. Principal Office Address			City	State	Zip		
394 Phillips Hill Road			Coventry	RI	02816		
7. Mailing Address of Limited	Liability Compa	any and Name o	r Title of Contact Person				
Contact Name			Contact Title				
	eil Brzoza			Member			
Street Address 394 Phillips Hill Road			Coventry	State R T	Zip		
		s) of the Limited	Liability Company, IF APPLICAB		02816 MEMBERS		
Manager Name			Manager Name				
Street Address			Street Address	Street Address			
City	State	Zip	City	State	Zip		
Manager Name			Manager Name	Manager Name			
Street Address			Street Address	Street Address			
City	State	Zip	City	State	Zip		
***		<u> </u>		Check the box to	indicate an attachment		
9. Resident Agent in Rhode Is	land. This inforn	nation is currently	of record with the Department of Stat	e. Changes require fil	ling Form 642.		
Under penalty of perjury, I o statements, and that all state	leclare and aff	irm that I have	examined this report, including	any accompanyi	ng schedules and		
Name of Authorized Person	· · · · · · · · · · · · · · · · · · ·			Date			
Neil BRZOZA				10 -11-16			
Signature of Authorized Perso	n	01011					
nul se	wed	SIGN	DOCUMENT HERE				

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED 8-0CT 1 4 2016