s second	itate of Rhode Island and Pro Office of the Secreta		IS Fee: \$50.00
Division Of Business Services			
148 W. River Street			
Providence RI 02904-2615 (401) 222-3040			
HOPE	~ /		
∟imited Liability Corr Annual Report	ipany		
Filing Period: September 1	- November 1		
n accordance with R.I.G.L.	7-16-66(d), each limited liability com	pany failing or refusing	
o file its annual report with	in thirty (30) days after the time presc		
6-66(b&c)) is subject to a	penalty fee of \$25.00.		
ANNUAL REPORT YEAR:	2018		
1. ID No. <u>000536041</u>			
2. Exact Name of the Limited Liability Company <u>PLA-FIT HEALTH, LLC</u>			
3. State of Formation			
State: <u>NH</u>			
	ARTICLE III		
-	Code that best describes the primary e information on <u>NAICS</u> can be found		he entity. Download
<u>713940</u>			
4. Brief Description of th	e Character of the Business Which	is Actually Conducted	l in Rhode Island
TO OWN AND OPERA	TE A HEALTH CLUB		
5. Principal Office Addre	SS		
No. and Street: 4 LIBERTY LANE WEST			
City or Town:HAMPTONState: \underline{NH} Zip: $\underline{03842}$ Country: \underline{USA}			
6. Mailing Address of Li	mited Liability Company and Name	e or Title of Contact Pe	rson:
-			
Contact Name: Contact Title: No. and Street: 4 LIBERTY LANE WEST			
	PTON State	: <u>NH</u> Zip: <u>03842</u>	Country: <u>USA</u>
7. Name and Address of DO NOT LIST MEMBE	Each Manager of the Limited Liab	ility Company, if Appl	icable.
Title	Individual Name	Addre	
1116	First, Middle, Last, Suffix	Address, City or Town, St	
MANAGER	CHRISTOPHER RONDEAU	4 LIBERTY HAMPTON, NH	Í LANE WEST 03824 USA

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

COGENCY GLOBAL INC. 222 JEFFERSON BOULEVARD WARWICK, RI 02888

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 27 Day of September, 2018 at 5:06:57 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By CHRISTOPHER RONDEAU

Signature of Authorized Person

Form No. 632 Revised 09/07

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