

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000100628

**Entity Name:** AGELESS SOLUTIONS, LLC

**Current Principal Place of Business:**

2401 FRIST BOULEVARD  
SUITE 7  
FT. PIERCE, FL 34950

**Current Mailing Address:**

2401 FRIST BOULEVARD  
SUITE 7  
FT. PIERCE, FL 34950

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

KATZMAN, SCOTT  
2401 FRIST BOULEVARD  
SUITE 7  
FT. PIERCE, FL 34950 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 MGR  
Name KATZMAN ARMS, ANTIQUES &  
FURNISHINGS LLC  
Address 2401 FRIST BOULEVARD, SUITE 7  
City-State-Zip: FT. PIERCE FL 34950

*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:** NEAL LECHTNER

AUTH REP

04/15/2014

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date