

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000023354

**Entity Name:** HEALTH AND LIFE L.A. LLC

**Current Principal Place of Business:**

23084 SANDALFOOT PLAZA DR.  
BOCA RATON, FL 33428

**Current Mailing Address:**

23084 SANDALFOOT PLAZA DR.  
BOCA RATON, FL 33428

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** Yes

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

ACEVEDO, LUCI T  
7353 NW 113 AV  
PARKLAND, FL 33076 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	Title	MGR
Name	ACEVEDO, LUCI	Name	VELA, CAMILO
Address	7353 NW 113 AV	Address	7353 NW 113 AV
City-State-Zip:	PARKLEND FL 33076	City-State-Zip:	PARKLAND FL 33076

*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:** LUCI ACEVEDO

**PRESIDENT**

**04/20/2014**

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

\_\_\_\_\_  
Date