## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000098149

Entity Name: ACP-LYFE, LLC

**Current Principal Place of Business:** 

4770 BISCAYNE BOULEVARD SUITE 900 MIAMI, FL 33137

## **Current Mailing Address:**

4770 BISCAYNE BOULEVARD SUITE 900 MIAMI, FL 33137 US

FEI Number: 46-3162593 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

NAVARRO-GARCIA, SANDRA 7951 SW 40TH STREET, SUITE 202 MIAMI, FL 33155 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

**FILED** Apr 11, 2016

**Secretary of State** 

CC0657270543

## Authorized Person(s) Detail:

Title MGR

CALDERON, MICHAEL Name

4770 BISCAYNE BOULEVARD Address

SUITE 900

MIAMI FL 33137 City-State-Zip:

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: MICHAEL CALDERON MANAGER

Electronic Signature of Signing Authorized Person(s) Detail

04/11/2016 Date