

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000105070

**Entity Name:** TREELIFE INVESTMENTS LLC

**Current Principal Place of Business:**

1850 SW 8TH STREET  
4TH FLOOR  
MIAMI, FL 33135

**Current Mailing Address:**

1850 SW 8TH STREET  
4TH FLOOR  
MIAMI, FL 33135

**FEI Number:** 46-3630584

**Certificate of Status Desired:** No

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

ALFIE, FLAVIO A  
2061 NE 210 STREET  
MIAMI, FL 33179 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 ALFIE, FLAVIO A  
Address 2061 NE 210 STREET  
City-State-Zip: MIAMI FL 33179

Title MGR  
Name ALFIE, DARIO L  
Address 11060 GRIFFING BLVD  
City-State-Zip: BISCAYNE PARK FL 33161

*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:** FLAVIO ALFIE

**MGR**

**02/15/2019**

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

\_\_\_\_\_  
Date