## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000071544

Entity Name: TOTAL LIFE LONG CONSULTANTS, LLC

**Current Principal Place of Business:** 

13900 CR 455, SUITE 107 #316 CLERMONT, FL 34711

**Current Mailing Address:** 

13900 CR 455, SUITE 107 #316 CLERMONT, FL 34711

**FEI Number: NOT APPLICABLE** Certificate of Status Desired: No

Name and Address of Current Registered Agent:

13900 CR 455, SUITE 107 #316

VARRAUX, ALAN R 13900 CR 455, SUITE 107 #316 CLERMONT, FL 34711 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.

Address

SIGNATURE:

Address

Electronic Signature of Registered Agent

Date

13900 CR 455, SUITE 107 #316

**FILED** Feb 15, 2018

**Secretary of State** 

CC7542978524

Authorized Person(s) Detail:

Title MGR

Title MGR

VARRAUX, ALAN R Name VARRAUX, LORRAINE P Name

City-State-Zip: CLERMONT FL 34711 City-State-Zip: CLERMONT FL 34711

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: ALAN VARRAUX **MANAGER** Electronic Signature of Signing Authorized Person(s) Detail

02/15/2018

Date