

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000147727

Entity Name: ART LIFE LAB LLC

Current Principal Place of Business:

1015 NW 23RD STREET #1
MIAMI, FL 33127

Current Mailing Address:

1015 NW 23RD STREET #1
MIAMI, FL 33127

FEI Number: 42-2562853

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARY E. PRADOS C.P.A., P.A.
8740 NE 2ND AVENUE
EL PORTAL, FL 33138 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 AMBR
Name FALCONI, JOSE
Address 259 WEBSTER STREET #1
City-State-Zip: EAST BOSTON MA 02128

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: JOSE FALCONI

DIRECTOR

04/23/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date