## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000143322

Entity Name: REALIFE FLORIDA 5 LLC

**Current Principal Place of Business:** 

6950 PHILIPS HWY.

STE 27

JACKSONVILLE, FL 32216

**Current Mailing Address:** 

6950 PHILIPS HWY.

**STE 27** 

JACKSONVILLE, FL 32216 US

FEI Number: 30-0881224 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PANDO, OR 6950 PHILIPS HWY.

STE 27

JACKSONVILLE, FL 32216 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 Mar 26, 2016

**Secretary of State** 

CC3115334104

Authorized Person(s) Detail:

Title MGR Title MBR

Name REALIFE MANAGEMENT GROUP LLC Name DESHE, ETAMAR

Address 6950 PHILIPS HWY. Address AMIKAM

STE 27

City-State-Zip: AMIKAM ISRAEL

City-State-Zip: JACKSONVILLE FL 32216

Title MBR

Name ORBACH, LILIANA

Address 166TH IGAL ALON ST.

APT 28

City-State-Zip: TEL AVIV ISRAEL 6744374

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: ERAN KANDELKER

03/26/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date