## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000111157

**Entity Name: MASSAGELYFE LLC** 

**Current Principal Place of Business:** 

1469 N MAGNOLIA F-3

OCALA, FL 34470

**Current Mailing Address:** 

100 NW 23RD AVE 203

OCALA, FL 34475 US

FEI Number: 82-1634488 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCDONALD, DOMINIC E 100 NW 23RD AVE APT 203 203

OCALA, FL 34475 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 30, 2018

**Secretary of State** 

CC0745738419

## Authorized Person(s) Detail:

Title MR

Name MCDONALD, DOMINIC EUGENE

Address 100 NW 23RD AVE

203

City-State-Zip: OCALA FL 34475

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.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: DOMINIC MCDONALD

MR

04/30/2018

Date