

**2019 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L17000213159

**Entity Name:** PRIDELIFE, L.L.C

**Current Principal Place of Business:**

6434 CAVA ALTA DR. UNIT: 205  
ORLANDO, FL 32835

**Current Mailing Address:**

6434 CAVA ALTA DR. UNIT: 205  
ORLANDO, FL 32835 UN

**FEI Number:** 82-3526025

**Certificate of Status Desired:** No

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

BOHORQUEZ SALAZAR, YOULEIDA MARIA  
6434 CAVA ALTA DR. UNIT: 205  
ORLANDO, FL 32835 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:** YOULEIDA MARIA BOHORQUEZ SALAZAR

04/12/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            AMBR  
Name            BOHORQUEZ, YOULEIDA MRS  
Address        6434 CAVA ALTA DR.  
                  UNIT: 205  
City-State-Zip: ORLANDO 32835

*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:** YOULEIDA MARIA BOHORQUEZ SALAZAR

AMBR

04/12/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date