2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000081807

Entity Name: BESTLYFE, LLC

Current Principal Place of Business:

3625 HARTSFIELD FOREST CIRCLE JACKSONVILLE. FL 32277

Current Mailing Address:

3625 HARTSFIELD FOREST CIRCLE JACKSONVILLE, FL 32277 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COSGROVE, KARINA I 3625 HARTSFIELD FOREST CIRCLE JACKSONVILLE, FL 32277 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: KARINA COSGROVE 04/26/2021

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title AR

Name COSGROVE, KARINA I

Address 3625 HARTSFIELD FOREST CIRCLE

City-State-Zip: JACKSONVILLE FL 32277

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: KARINA COSGROVE

Electronic Signature of Signing Authorized Person(s) Detail

CEO

04/26/2021

FILED Apr 26, 2021

Secretary of State

7844339823CC

Date