

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000110611

**Entity Name:** GOOD BREATH LABS, LLC.

**Current Principal Place of Business:**

3201 NE 183 STREET  
UNIT 2602  
AVENTURA, FL 33160

**Current Mailing Address:**

3201 NE 183 STREET  
UNIT 2602  
AVENTURA, FL 33160 US

**FEI Number:** 47-1565389

**Certificate of Status Desired:** No

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

KLEIN, LIZA M  
3201 NE 183 STREET  
UNIT 2602  
AVENTURA, FL 33160 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:** LIZA M KLEIN

01/26/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name CASTANEDA, ISAAC  
Address 73 FRANKLIN ST  
#2  
City-State-Zip: TENAFLY NJ 07670

Title CEO  
Name KLEIN, LIZA M  
Address 3201 NE 183 ST UNIT 2602  
City-State-Zip: AVENTURA FL 33160

*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:** ISAAC CASTANEDA

MGR

01/26/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date