

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000085547

Entity Name: ESTATE LIFE PLAN LLC**Current Principal Place of Business:**1810 N LAUDERDALE AVE, STE 2110
NORTH LAUDEDALE, FL 33068**Current Mailing Address:**1810 N LAUDERDALE AVE, STE 2110
NORTH LAUDEDALE, FL 33068 US**FEI Number:** 85-0562342**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KALI COLE, SHEEBA
1810 N. LAUDERDALE AVENUE
UNIT 2110
NORTH LAUDERDALE, FL 33068 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

Authorized Person(s) Detail :

Title	AMBR
Name	COLE, SHEEBA KALI
Address	1810 N. LAUDERDALE AVENUE UNIT 2110
City-State-Zip:	NORTH LAUDERDALE FL 33068

Title	AMBR
Name	COLE, JOHN MASON
Address	1810 N. LAUDERDALE AVE UNIT 2110
City-State-Zip:	NORTH LAUDERDALE FL 33068

Title	MGR
Name	COLE REALTY LLC
Address	1810 N LAUDERDALE AVE STE 2110
City-State-Zip:	NORTH LAUDERDALE FL 33068

Title	AMBR
Name	ESTATE MANAGEMENT & PROTECTION LLC
Address	1810 N LAUDERDALE AVE SUITE 2110
City-State-Zip:	NORTH LAUDEDALE FL 33068

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: SHEEBA KALI COLE

AMBR

03/11/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date