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.

AGENT

SIGNATURE: JOHN R. CLARKE

Electronic Signature of Signing Authorized Person(s) Detail

Name and Address of Current Registered Agent:

CLARKE, JOHN R 134 PALM HARBOUR BLVD PANAMA CITY BEACH, FL 32408 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:

Authorized Person(s) Detail : Title MGR Title MGR CLARKE, JOHN R Name CLARKE, PEGGY C Name 134 PALM HARBOUR BLVD Address 134 PALM HARBOUR BLVD Address City-State-Zip: PANAMA CITY BEACH FL 32408

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000128883

Entity Name: CLARKE LIFE SUPPORT CONSULTING, LLC

Current Principal Place of Business:

134 PALM HARBOUR BLVD PANAMA CITY BEACH, FL 32408

Current Mailing Address:

134 PALM HARBOUR BLVD PANAMA CITY BEACH. FL 32408 US

FEI Number: 86-2392562

Electronic Signature of Registered Agent

City-State-Zip: PANAMA CITY BEACH FL 32408

Date

04/18/2021 Date

FILED Apr 18, 2021 Secretary of State 5391560541CC

Certificate of Status Desired: Yes