

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000422404

**Entity Name:** CHILLED LIFE, LLC

**Current Principal Place of Business:**

1206 LINCOLN STREET  
HOLLYWOOD, FL, FL 33019

**Current Mailing Address:**

1206 LINCOLN STREET  
HOLLYWOOD FL, FL 33019 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

GIANOLA, TRACI  
1206 LINCOLN STREET  
HOLLYWOOD, FL, FL 33019 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 AUTHORIZED MEMBER  
Name GIANOLA, TRACI TRACI GIANOLA  
Address 1206 LINCOLN STREET  
City-State-Zip: HOLLYWOOD, FL FL 33019

*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:** TRACI GIANOLA

**PRESIDENT**

**01/31/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date