

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000303588

**Entity Name:** BETTER LIFE BEHAVIOR LLC

**Current Principal Place of Business:**

4308 KIRKMAN RD.  
1703  
ORLANDO, FL 32811

**Current Mailing Address:**

4308 KIRKMAN RD.  
1703  
ORLANDO, FL 32811 UN

**FEI Number:** 87-1439931

**Certificate of Status Desired:** No

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

TORREAN, LEE S  
4308 KIRKMAN RD.  
1703  
ORLANDO, FL 32811 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            OWNER  
Name            LEE, TORREAN S  
Address        4308 KIRKMAN RD.  
                  1703  
City-State-Zip: ORLANDO 32811

*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:** TORREAN S LEE

OWNER

05/01/2023

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

\_\_\_\_\_  
Date