

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000428137

Entity Name: RAW LYFE DISPATCH LLC

Current Principal Place of Business:

5224 SR 46
STE 314
SANFORD, FL 32771

Current Mailing Address:

5224 SR 46
STE 314
SANFORD, FL 32771

FEI Number: 81-2385647

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EDWARDS, TRACI C
271 CHEROKEE HILL CT
DELAND, FL 32724 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	MGR	Title	MGR
Name	JOHNSON, ANTONIO J	Name	EDWARDS, TRACI C
Address	1304 SOLSTICE LOOP	Address	271 CHEROKEE HILL CT
City-State-Zip:	SANFORD FL 32771	City-State-Zip:	DELAND FL 32724

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 EDWARDS

MGR

04/30/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date