

**2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M18000009688

**Entity Name:** ESCALATE LIFE SCIENCES LLC

**Current Principal Place of Business:**

11954 NARCOOSEE RD  
SUITE 2-253  
ORLANDO, FL 32832

**Current Mailing Address:**

11954 NARCOOSEE RD  
SUITE 2-253  
ORLANDO, FL 32832 US

**FEI Number:** 82-0960127

**Certificate of Status Desired:** No

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

TORRES, EDGAR  
11954 NARCOOSEE RD  
SUITE 2-253  
ORLANDO, FL 32832 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	TORRES, EDGAR	Name	ZAPATA, TANYA
Address	11954 NARCOOSEE RD SUITE 2-253	Address	11954 NARCOOSEE RD SUITE 2-253
City-State-Zip:	ORLANDO FL 32832	City-State-Zip:	ORLANDO FL 32832

*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:** EDGAR TORRES

**MGR**

**04/21/2021**

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

\_\_\_\_\_  
Date