

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000103788

Entity Name: LYFE LLC

FILED
May 01, 2012
Secretary of State

Current Principal Place of Business:

12639 ASHMORE GREEN DR N
JACKSONVILLE, FL 32246 US

New Principal Place of Business:

Current Mailing Address:

12639 ASHMORE GREEN DR N
JACKSONVILLE, FL 32246 US

New Mailing Address:

FEI Number: 45-0650942

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENDERLITE, PETER J
12639 ASHMORE GREEN DR N
JACKSONVILLE, FL 32246 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: HENDERLITE, PETER J
Address: 12639 ASHMORE GREEN DR N
City-St-Zip: JACKSONVILLE, FL 32246 US

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: PETER HENDERLITE

OWNE

05/01/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date