

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000080992

**Entity Name:** THIAM LIFE SOLUTIONS, LLC

**Current Principal Place of Business:**

4500 N FEDERAL HWY  
#270  
POMPANO BEACH, FL 33064

**Current Mailing Address:**

4500 N FEDERAL HWY  
#270  
POMPANO BEACH, FL 33064 US

**FEI Number:** 26-0667441

**Certificate of Status Desired:** No

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

BOWE, THIAM  
4500 N FEDERAL HWY  
#270  
POMPANO BEACH, FL 33064 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 MGRM  
Name BOWE, THIAM  
Address 4500 N FEDERAL HIGWAY.,#270  
City-State-Zip: POMPANO BEACH FL 33064

*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:** THIAM BOWE

MGRM

01/13/2015

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

\_\_\_\_\_  
Date