

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000038883

**Entity Name:** 941 LIFE LLC

**Current Principal Place of Business:**

5306 HOLMES BLVD.  
STE 820  
HOLMES BEACH, FL 34217

**Current Mailing Address:**

5306 HOLMES BLVD.  
STE 820  
HOLMES BEACH, FL 34217 US

**FEI Number:** 45-4855419

**Certificate of Status Desired:** No

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

GARDI, LES CPA  
7061 S TAMIAMI TRAIL  
SUITE C  
SARASOTA, FL 34231 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 MRGM  
Name HYNDS, MICHAEL  
Address 5306 HOLMES BLVD STE 820  
City-State-Zip: HOLMES BEACH FL 34217

Title MGRM  
Name HYNDS, DEBBIE JILL  
Address 5306 HOLMES BLVD STE 820  
City-State-Zip: HOLMES BEACH FL 34217

Title MGR  
Name HYNDS, CLAUDIA  
Address 5306 HOLMES BLVD.  
STE 820  
City-State-Zip: HOLMES BEACH FL 34217

*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:** MICHAEL HYNDS

**OWNER**

**03/07/2021**

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

\_\_\_\_\_  
Date