

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000054341

Entity Name: ILIFESTYLE, LLC

Current Principal Place of Business:

6892 SPERONE ST
ORLANDO, FL 32819

Current Mailing Address:

P.O. BOX 690175
ORLANDO, FL 32869 US

FEI Number: 45-5184093

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

FERNANDEZ, MAGALY
6892 SPERONE ST
ORLANDO, FL 32819 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: MAGALY FERNANDEZ

04/08/2017

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGRM	Title	MGR
Name	FERNANDEZ, MAGALY	Name	FERNANDEZ, MAGALY
Address	P.O. BOX 690175	Address	P.O. BOX 690175
City-State-Zip:	ORLANDO FL 32869	City-State-Zip:	ORLANDO FL 32869
Title	SECRETARY		
Name	HARDEN, CHANEL		
Address	P.O. BOX 690175		
City-State-Zip:	ORLANDO FL 32869		

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: MAGALY FERNANDEZ

CEO/PRESIDENT

04/08/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date