2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 23, 2021
Secretary of State
3270837025CC

DOCUMENT# L12000155993

Entity Name: LIFEFORCE "LLC"

Current Principal Place of Business:

4606 MIRABELLA CT
ST PETERSBURG BEACH, FL 33706

Current Mailing Address:

4606 MIRABELLA CT
ST PETE BEACH, FL 33706 US

FEI Number: 46-2116402

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NEMOVITZ, HOWARD M
4606 MIRABELLA CT
ST PETE BEACH, FL 33706 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: HOWARD NEMOVITZ 04/23/2021

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGR
Name	NEMOVITZ, HOWARD J
Address	4606 MIRABELLA CT
City-State-Zip:	ST PETE BEACH FL 33706

Title	MGRM
Name	NEMOVITZ, HOWARD J
Address	4606 MIRABELLA COURT
City-State-Zip:	ST.PETE BEACH, FL 33706

Title	EVPD
Name	NEMOVITZ, HOWARD J
Address	4606 MIRABELLA COURT
City-State-Zip:	ST PETE BEACH FL 33706

Title	MBR, AUTHORIZED MEMBER
Name	BRIDWELL, LESLIE J
Address	1544 THOREAU DRIVE
City-State-Zip:	SUWANEE GA 30024

Title	MGR
Name	BRIDWELL, LESLIE J
Address	1544 THOREAU DR
City-State-Zip:	SUWANNE GA 30024

Title	P
Name	BRIDWELL, LESLIE J
Address	1544 THOREAU DR
City-State-Zip:	SUWANNE GA 30024

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: HOWARD J NEMOVITZ MGR 04/23/2021

Electronic Signature of Signing Authorized Person(s) Detail — Date