

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000170386

Entity Name: PRIMELIFE NUTRITION, LLC

Current Principal Place of Business:

16748 TALL GRAAS LANE
CLERMONT, FL 34711

Current Mailing Address:

16748 TALL GRAAS LANE
CLERMONT, FL 34711 US

FEI Number: 46-4282582

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SKY, MICHAEL
16748 TALL GRAAS LANE
CLERMONT, FL 34711 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	Title	AUTHORIZED MEMBER
Name	SKY, MICHAEL	Name	SKY, OLGA
Address	16748 TALL GRAAS LANE	Address	16748 TALL GRASS LANE
City-State-Zip:	CLERMONT FL 34711	City-State-Zip:	CLERMONT FL

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 SKY

MANAGER

06/23/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date