

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000030164

Entity Name: LIFESURE LLC

Current Principal Place of Business:

4350 OAKES RD.
SUITE 516
DAVIE, FL 33314

Current Mailing Address:

4350 OAKES RD.
SUITE 516
DAVIE, FL 33314 US

FEI Number: 46-4913482

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KOPELOWITZ, BRIAN R
200 SW 1ST AVE SUITE 1200
FT LAUDERDALE, FL 33301 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 MGR
Name MATTHEW GEORGE PENSON &
ALYSSA JILL PENSON
Address 8005 NW 110TH DR.
City-State-Zip: PARKLAND FL 33076

Title MANAGER
Name ROSEN, LON
Address 12575 SW 14TH PLACE
City-State-Zip: DAVIE FL 33325

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: MATTHEW PENSON

MANAGER

01/16/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date