

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000046802

**Entity Name:** ORDINARY TO EXTRAORDINARY LIFE, LLC

**Current Principal Place of Business:**

8000 BAYMEADOWS CIRCLE E  
# 24  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

8000 BAYMEADOWS CIRCLE E  
# 24  
JACKSONVILLE, FL 32256 US

**FEI Number:** 32-0448238

**Certificate of Status Desired:** No

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

BILD, EILEEN  
8000 BAYMEADOWS CIRCLE E  
STE 24  
JACKSONVILLE, FL 32256 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 BILD, EILEEN  
Address 8000 BAYMEADOWS CIRCLE E, SUITE  
24  
City-State-Zip: JACKSONVILLE FL 32256

Title MEM  
Name BILD, EILEEN  
Address 8000 BAYMEADOWS CIRCLE E, SUITE  
24  
City-State-Zip: JACKSONVILLE FL 32256

Title AMBR  
Name BILD, TREVOR  
Address 8000 BAYMEADOWS CIRCLE E  
STE 24  
City-State-Zip: JACKSONVILLE FL 32256

*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:** EILEEN O BILD

**CEO**

**03/06/2022**

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

\_\_\_\_\_  
Date