

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000062966

**Entity Name:** MO LIFE MEDIA, LLC

**Current Principal Place of Business:**

2436 N FEDERAL HIGHWAY  
#393  
LIGHTHOUSE POINT, FL 33064

**Current Mailing Address:**

2436 N FEDERAL HIGHWAY  
#393  
LIGHTHOUSE POINT, FL 33064 US

**FEI Number:** 46-5299329

**Certificate of Status Desired:** No

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

CITRIN, STACEY  
108 SE 4TH TERRACE  
POMPANO BEACH, FL 33060 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 AMBR  
Name FAUL, MAUREEN  
Address 108 SE 4TH TERRACE  
City-State-Zip: POMPANO BEACH FL 33060

Title MGR  
Name FAUL, MAUREEN  
Address 108 SE 4TH TERRACE  
City-State-Zip: POMPANO BEACH FL 33060

Title MGR  
Name CITRIN, STACEY  
Address 108 SE 4TH TERRACE  
City-State-Zip: POMPANO BEACH FL 33060

*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:** MAUREEN FAUL

**PRESIDENT**

**02/14/2017**

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

\_\_\_\_\_  
Date