

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000015539

**Entity Name:** MOSAN LIFE, LLC

**Current Principal Place of Business:**

2048 HOWLAND BLVD  
#391331  
DELTONA, FL 32739

**Current Mailing Address:**

2048 HOWLAND BLVD  
#391331  
DELTONA, FL 32739 US

**FEI Number:** 47-2956618

**Certificate of Status Desired:** No

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

BURKE, JONATHAN  
2048 HOWLAND BLVD  
#391331  
DELTONA, FL 32739 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  
Name BURKE, JONATHAN  
Address 2048 HOWLAND BLVD  
#391331  
City-State-Zip: DELTONA FL 32739

Title AUTHORIZED MEMBER  
Name MOSAN ENTERPRISES, INC  
Address 3049 ETTA CIRCLE  
City-State-Zip: DELTONA FL 32738

*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:** JONATHAN BURKE

MGRM

02/23/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date