2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2019
Secretary of State
5850532986CC

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Entity Name: ADVENTURE LIFE PRODUCTIONS, LLC

Current Principal Place of Business:

1200 ANASTASIA AVENUE
SUITE 216
CORAL GABLES, FL 33134

Current Mailing Address:

1200 ANASTASIA AVENUE
SUITE 216
CORAL GABLES, FL 33134 US

FEI Number: 81-4294761

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KLAPPER LEON, ALISON
1200 ANASTASIA AVENUE
SUITE 216
CORAL GABLES, FL 33134 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	AP	Title	AR
Name	KROPKE, CHARLES J	Name	KLAPPER LEON, ALISON
Address	1200 ANASTASIA AVENUE, SUITE 216	Address	1200 ANASTASIA AVENUE, SUITE 216
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	CORAL GABLES FL 33134

Title	AMBR
Name	STOCK, MATTHEW
Address	13040 N CALUSA CLUB DR
City-State-Zip:	MIAMI FL 33186

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: ALISON KLAPPER LEON MANAGING PARTNER 04/29/2019

Electronic Signature of Signing Authorized Person(s) Detail — Date