

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000022309

**Entity Name:** REALIFE FLORIDA 46 LLC

**Current Principal Place of Business:**

411 NE 2ND AVE  
HALLANDALE, FL 33009

**Current Mailing Address:**

411 NE 2ND AVE  
HALLANDALE, FL 33009 UN

**FEI Number:** 82-4793620

**Certificate of Status Desired:** No

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

KENDELKER, YARON  
411 NE 2ND AVE  
HALLANDALE, FL 33009 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:** KENDELKER YARON

03/07/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name REALIFE MANAGEMENT GROUP LLC  
Address 411 NE 2ND AVE  
City-State-Zip: HALLANDALE FL 33009

*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:** YARON KENDELKER

MEMBER

03/07/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date