

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000182323

Entity Name: ARFIDLIFE, LLC

Current Principal Place of Business:

2390 TAMIAMI TRAIL N
SUITE 202
NAPLES, FL 34103

Current Mailing Address:

2390 TAMIAMI TRAIL N
SUITE 202
NAPLES, FL 34103 US

FEI Number: 83-1440214

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SUNDI FAITH CPA
2390 TAMIAMI TRAIL N
SUITE 202
NAPLES, FL 34103 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: SUNDI FAITH

04/06/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER
Name PURTLE, MARY
Address 430 29TH NW
City-State-Zip: NAPLES FL 34120

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: MARY PURTLE

P

04/06/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date