

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000247631

**Entity Name:** ARAE LIFE, LLC

**Current Principal Place of Business:**

2050 W CROWN POINTE BLVD  
#209C  
NAPLES, FL 34112

**Current Mailing Address:**

2050 W CROWN POINTE BLVD  
#209C  
NAPLES, FL 34112 US

**FEI Number:** 83-2791207

**Certificate of Status Desired:** No

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

WILLIAMS, ALLI RAE LENA  
2050 W CROWN POINTE BLVD  
#209C  
NAPLES, FL 34112 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:** ALLI RAE LENA WILLIAMS

03/12/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name WILLIAMS, ALLI RAE LENA  
Address 2050 W CROWN POINTE BLVD  
#209C  
City-State-Zip: NAPLES FL 34112

*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:** WILLIAMS, ALLI RAE LENA

OWNER

03/12/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date