

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000070865

**Entity Name:** LEGACY LIFE BIZ LLC

**Current Principal Place of Business:**

7339 E WILLIAMS DRIVE  
UNIT 28574  
SCOTTSDALE, AZ 85255

**Current Mailing Address:**

PO BOX 28574  
SCOTTSDALE, AZ 85255 US

**FEI Number:** 83-3933936

**Certificate of Status Desired:** Yes

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

PRECOPIO, MJ  
7339 E WILLIAMS DRIVE  
UNIT 28574  
SCOTTSDALE, FL 85255 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 MGR  
Name PRECOPIO, MJ  
Address PO BOX 28574  
City-State-Zip: SCOTTSDALE AZ 85255

*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:** MJ PRECOPIO

**MANAGER**

**04/28/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date