

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000084788

Entity Name: BETTER HEALTH LABS LIMITED LIABILITY COMPANY

Current Principal Place of Business:

902 CLINT MOORE ROAD SUITE 124
BOCA RATON, FL 33487

Current Mailing Address:

902 CLINT MOORE ROAD SUITE 124
BOCA RATON, FL 33487

FEI Number: 83-4056629

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHATZ, SAMUEL G
902 CLINT MOORE ROAD
SUITE124
BOCA RATON, FL 33487 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 SHATZ, EDWARD S
Address 902 CLINT MOORE ROAD SUITE 124
City-State-Zip: BOCA RATON FL 33487

Title AMPR
Name SHATZ, HAROLD L
Address 902 CLINT MOORE ROAD SUITE 124
City-State-Zip: BOCA RATON FL 33487

Title AMBR
Name ROSENBERG, SCOTT
Address 902 CLINT MOORE ROAD SUITE 124
City-State-Zip: BOCA RATON FL 33487

Title AMBR
Name SHATZ, SAMUEL G
Address 902 CLINT MOORE ROAD SUITE 124
City-State-Zip: BOCA RATON FL 33434

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: SAMUEL SHATZ

AMBR

01/20/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date