

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000062335

Entity Name: OPTIMAL HEALTH, LLC

FILED  
Apr 11, 2011  
Secretary of State

**Current Principal Place of Business:**

2115 1ST ST. APT. B  
INDIANA ROCKS BEACH, FL 33785

**New Principal Place of Business:**

1310 GULF BLVD. #101  
INDIAN ROCKS BEACH, FL 33785

**Current Mailing Address:**

2115 1ST ST. APT. B  
INDIANA ROCKS BEACH, FL 33785

**New Mailing Address:**

1310 GULF BLVD. #101  
INDIAN ROCKS BEACH, FL 33785

FEI Number: 04-3797620

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LALUMIERE, BRIANNA  
2115 1ST ST. APT. B  
INDIAN ROCKS BEACH, FL 33785 US

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

LALUMIERE, BRIANNA  
1310 GULF BLVD. #101  
INDIAN ROCKS BEACH, FL 33785 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: BRIANNA LALUMIERE

04/11/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: LALUMIERE, BRIANNA  
Address: 1310 GULF BLVD. #101  
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: BRIANNA LALUMIERE

MGR

04/11/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date