Name and Address of our ent registered Agent.				
LESMOND, LUIS E 5085 NW 7TH STREET #1201 MIAMI, FL 33126 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	: LUIS E LESMOND			10/17/2015
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	PD	Title	VPD	
Name	LESMOND, LUIS E	Name	DE ALBA, EDUARDO	
Address	5085 NW 7TH STREET #1201	Address	5085 NW 7TH STREET #1201	
City-State-Zip:	MIAMI FL 33126	City-State-Zip:	MIAMI FL 33126	
Title	D			
Name	ESCALONA, MICHAEL			
Address	5085 NW 7TH STREET #1201			

5085 NW 7TH STREET #1201

Name and Address of Current Registered Agent:

City-State-Zip: MIAMI FL 33126

DOCUMENT# P14000078140

Entity Name: A 3 L NATURALS PRODUCTS, CORP.

2015 FLORIDA PROFIT CORPORATION REINSTATEMENT

#### **Current Principal Place of Business:**

5085 NW 7TH STREET #1201 MIAMI, FL 33126

### **Current Mailing Address:**

MIAMI, FL 33126 US

## FEI Number: 47-1895296

# Certificate of Status Desired: No

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LUIS E LESMOND

PRESIDENT

Electronic Signature of Signing Officer/Director Detail

# FILED Oct 17, 2015 Secretary of State CR6357199890