

**2015 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L14000101613

**Entity Name:** HERBAL SOLUTIONS, LLC

**Current Principal Place of Business:**

47 MENENDEZ ROAD  
ST. AUGUSTINE, FL 32080

**Current Mailing Address:**

47 MENENDEZ ROAD  
ST. AUGUSTINE, FL 32080 US

**FEI Number:** 47-1193645

**Certificate of Status Desired:** Yes

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

CURPIER, CARL  
47 MENENDEZ ROAD  
ST. AUGUSTINE, FL 32080 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:** CARL CURPIER

10/29/2015

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name CURPIER, CARL  
Address 47 MENENDEZ ROAD  
City-State-Zip: ST. AUGUSTINE FL 32080

*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:** CARL CURPIER

OWNER

10/29/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date