

# 2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000038843

**FILED**  
**Oct 05, 2006**  
**Secretary of State**

**Entity Name:** GET HEALTHY LLC

**Current Principal Place of Business:**

801 N. MAGNOLIA AVE., STE. 201  
ORLANDO, FL 32803

**New Principal Place of Business:**

142 W. LAKEVIEW AVE.  
SUITE 2040  
LAKE MARY, FL 32746 US

**Current Mailing Address:**

801 N. MAGNOLIA AVE., STE. 201  
ORLANDO, FL 32803

**New Mailing Address:**

142 W. LAKEVIEW AVE.  
SUITE 2040  
LAKE MARY, FL 32746 US

**FEI Number:** 30-0463380      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

AM&E SERVICES LLC  
801 N. MAGNOLIA AVE., STE. 201  
ORLANDO, FL 32803 US

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

SAYRE, SHANNON  
142 W. LAKEVIEW AVE.  
SUITE 2040  
LAKE MARY, FL 32746 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: SHANNON SAYRE

10/05/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: BRADY, PAMELA  
Address: 6211 S. HAMPSHIRE COURT  
City-St-Zip: WINDERMERE, FL 347865618

Title: MGR ( ) Delete  
Name: SAYRE, SHANNON  
Address: 6211 S. HAMPSHIRE COURT  
City-St-Zip: WINDERMERE, FL 347865618

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: SAYRE, SHANNON  
Address: 142 W. LAKEVIEW AVE., SUITE 2040  
City-St-Zip: LAKE MARY, FL 32746

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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: SHANNON SAYRE

MGR

10/05/2006

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