2008 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 30, 2008
Secretary of State

DOCUMENT# L04000018169

Entity Name: E-Z LIFE DESIGNS, LLC

Current Principal Place of Business:

8535 LOVAS TRAIL
TRINITY, FL 34655 US

New Principal Place of Business:

Current Mailing Address:

8535 LOVAS TRAIL
TRINITY, FL 34655 US

New Mailing Address:

FEI Number: 42-1624586 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
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:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS BLVD
SUITE A-100
TAMPA, FL 336123425 US

Name and Address of New Registered Agent:

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: JOHN R. JONES

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title:	MGR	( ) Delete
Name:	MITCHELL, CHARLES T	
Address:	8535 LOVAS TRAIL	
City-St-Zip:	TRINITY, FL 34655 US	
Title:	MGRM	( ) Delete
Name:	TIPTON, JENNIFER N	
Address:	8535 LOVAS TRAIL	
City-St-Zip:	TRINITY, FL 34655 US	
Title:	MGRM	( ) Delete
Name:	MITCHELL, PAMELA K	
Address:	8535 LOVAS TRAIL	
City-St-Zip:	TRINITY, FL 34655 US	
Title:	MGRM	( ) Delete
Name:	TIPTON, RICHARD L	
Address:	8535 LOVAS TRAIL	
City-St-Zip:	TRINITY, FL 34655 US	

ADDITIONS/CHANGES:

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

I hereby certify that the information supplied with this filing does not qualify 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: CHARLES T. MITCHELL MGR 10/30/2008

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