

2010 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000085161

FILED
Oct 05, 2010
Secretary of State

Entity Name: NATURAL SOLUTIONS, LLC

Current Principal Place of Business:

1271-69TH. STREET NORTH
ST. PETERSBURG, FL 33710

New Principal Place of Business:

1444-70TH STREET NORTH
ST. PETERSBURG, FL 33710

Current Mailing Address:

1271-69TH. STREET NORTH
ST. PETERSBURG, FL 33710

New Mailing Address:

1444-70TH. STREET NORTH
ST. PETERSBURG, FL 33710

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FITZGERALD, JOHN
6450 FIRST AVENUE NORTH
ST. PETERSBURG, FL 33710 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 FITZGERALD

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MS
Name: FITZGERALD, ASHLIEBETH
Address: 1444-70TH. STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33710

Title: MR
Name: FITZGERALD, DAVID R
Address: 1444-70TH. ST. N.
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: MR
Name: FITZGERALD, JOHN J
Address: 1271-69 ST. N.
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: MS
Name: FITZGERALD, RUTH M
Address: 1271-69 ST. N.
City-St-Zip: SAINT PETERSBURG, FL 33710

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: JOHN FITZGERALD

MGR

10/05/2010

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