

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000051795

**FILED**  
**Nov 15, 2011**  
**Secretary of State**

**Entity Name:** SNAP OUT OF IT - REDESIGN, L.L.C.

**Current Principal Place of Business:**

90 COUNTRY CLUB DRIVE WEST  
DESTIN, FL 32541 US

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 5534  
DESTIN, FL 32540 US

**New Mailing Address:**

**FEI Number:** 20-2894006

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CONERLY, BOWMAN & DYKES, L.L.P.  
4481 LEGENDARY DRIVE  
SUITE 200  
DESTIN, FL 32541 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: J. BRUCE BOWMAN

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** LINVILLE, KAREN  
**Address:** POST OFFICE BOX 5534  
**City-St-Zip:** DESTIN, FL 32540 US

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: KAREN LINVILLE

MGRM

11/15/2011

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