2012 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Jan 08, 2012
Secretary of State

DOCUMENT# L05000073060

Entity Name: PAIN RELIEF, LLC

Current Principal Place of Business:

636 E ATLANTIC AVE
#211
DELRAY BEACH, FL 33483

New Principal Place of Business:

636 E ATLANTIC AVE
#211
DELRAY BEACH, FL 33483 UN

Current Mailing Address:

636 E ATLANTIC AVE
#211
DELRAY BEACH, FL 33483

New Mailing Address:

FEI Number: 20-3198243 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TUCKER, DAVID B
636 E ATLANTIC AVE
SUITE 211
DELRAY BEACH, FL 33483 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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: TUCKER, DAVID B
Address: 636 E ATLANTIC AVE #211
City-St-Zip: DELRAY BEACH, FL 33483 US

Title: MGRM
Name: SEGAL, JON
Address: 636 E ATLANTIC AVE #211
City-St-Zip: DELRAY BEACH, FL 33483

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 Statues.

SIGNATURE: DAVID TUCKER MGRM 01/08/2012

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