2008 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
May 30, 2008
Secretary of State

DOCUMENT# L05000098204

Entity Name: LIVING WATERS DAY SPA, LLC

Current Principal Place of Business:

4589 GALLUP AVE.
SARASOTA, FL 34233

New Principal Place of Business:

439 BELMONT AVE
VENICE, FL 34293

Current Mailing Address:

4589 GALLUP AVE.
SARASOTA, FL 34233

New Mailing Address:

439 BELMONT AVE
VENICE, FL 34293

FEI Number: 86-1148430 **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:

HORNBUCKLE, KERI L
4589 GALLUP AVE.
SARASOTA, FL 34233 US

Name and Address of New Registered Agent:

DUFF, KERI L LMT
439 BELMONT AVE
VENICE, FL 34293 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: KERI L. DUFF, LMT 05/30/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MS. ( ) Delete
Name: HORNBUCKLE, KERI L LMT
Address: 4589 GALLUP AVE.
City-St-Zip: SARASOTA, FL 34233

ADDITIONS/CHANGES:

Title: MS. (X) Change ( ) Addition
Name: DUFF, KERI L LMT
Address: 439 BELMONT AVE
City-St-Zip: VENICE, FL 34293

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: KERI L. DUFF, LMT MRS. 05/30/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date