

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000006514

Entity Name: THE LIFE GROUP, LLC

FILED
Oct 16, 2009
Secretary of State

Current Principal Place of Business:

6877 SW 48TH AVE
PALM CITY, FL 34990

New Principal Place of Business:

6 HERON'S NEST
STUART, FL 34996

Current Mailing Address:

2336 SE OCEAN BLVD., #128
STUART, FL 34996

New Mailing Address:

FEI Number: 20-4303073 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

Name and Address of New Registered Agent:

SLANE, JILL
2336 SE OCEAN BLVD #128
STUART, FL 34996 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: JILL SLANE

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SLANE, JILL
Address: 6877 SW 48TH AVE
City-St-Zip: PALM CITY, FL 34990

Title: MGRM () Delete
Name: SLANE, RODNEY
Address: 6877 SW 48TH AVE
City-St-Zip: PALM CITY, FL 34990

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SLANE, JILL
Address: 2336 SE OCEAN BLVD #128
City-St-Zip: STUART, FL 34996

Title: MGRM (X) Change () Addition
Name: SLANE, RODNEY
Address: 2336 SE OCEAN BLVD #128
City-St-Zip: STUART, FL 34996

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: JILL SLANE

MGR

10/16/2009

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