

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000045401

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Entity Name:** TOTAL HEALTH CONSULTING, L.L.C.

**Current Principal Place of Business:**

653 W.LUMSDEN RD  
BRANDON, FL 33511

**New Principal Place of Business:**

**Current Mailing Address:**

653 W.LUMSDEN RD  
BRANDON, FL 33511

**New Mailing Address:**

**FEI Number:** 20-4170406

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CUASCUT-REYES, AIDA IRIS  
653 W. LUMSDEN ROAD  
BRANDON, FL 33511 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:** AIDA I. CUASCUT-REYES

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** CEO  
**Name:** CUASCUT-REYES, AIDA I  
**Address:** 653 W. LUMSDEN ROAD  
**City-St-Zip:** BRANDON, FL 33511

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:** AIDA I CUASCUT-REYES

CEO

01/05/2011

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