

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000059373

FILED
Oct 13, 2009
Secretary of State

Entity Name: PURE LIFE PRODUCTS LLC

Current Principal Place of Business:

10105 NW 88TH AVE
MEDLEY, FL 33178 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 951918
LAKE MARY, FL 32795 US

New Mailing Address:

FEI Number: 20-5017896 **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:

Name and Address of New Registered Agent:

SAWYER, MARK P
10105 NW 88TH AVE
MEDLEY, FL 33178 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: MARK P SAWYER

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SAWYER, MARK P
Address: PO BOX 951918
City-St-Zip: LAKE MARY, FL 32795 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR () Change (X) Addition
Name: MCCOMBS, JAMES E
Address: 521 MOCKINGBIRD CT
City-St-Zip: LAKE MARY, FL 32746

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: MARK P SAWYER

MGR

10/13/2009

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