107000007513

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S. PRATHER



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 17, 2015

BETTER LIVING ENTERPRISES, LLC 1500 SW 30TH AVE, UNIT 1-2 BOYNTON BEACH, FL 33426 US

SUBJECT: BETTER LIVING ENTERPRISES, LLC

Ref. Number: L07000007513

In a recent audit of our records, we have determined that the above named entity has designated itself as Registered Agent.

The purpose of this letter is to advise you a business entity may not serve as its own Registered Agent. We are asking you to designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please complete the enclosed Statement of Registered Office or Registered Agent form for filing at no charge. Return the completed form to personal and confidential attention. The address is listed below.

This letter is to be considered your 60 day notice that your entity will be subject to administrative dissolution or revocation if this error is not corrected by April 21, 2015.

If you have any questions concerning the filing of your document, please call (850) 245-6900.

Stacy Prather Regulatory Specialist III

Letter Number: 515A00003327

COVER LETTER

TO: Registration Section: Division of Corporations	
SUBJECT: Better Living Enterprise, LLC Name of Limited Liability Company	; .
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Mitchell Alkins Name of Person	•.
Orther Living Extreprise LLC Firm/Company	
1500 SW 30th Am Suite Ha	
Boyston Dian, FL 33424 City/State and Zip Code	
Better living florida & grail. com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Mitchell Aleins at (SU) 347-1362 Name of Person Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: MAILING ADDRESS:	
Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

	~	n 1 ·	S i				
i. Na	me of the limited liability company: $\underline{\hspace{1cm}}$	Her Living	5 Enterpri	isis, LLC	<u> </u>		
2. (a)	1500 SW 30th Ann. Svite 1	+ }	(b) G	Same			
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)						
	Bayaton Brach, FL 3342	<u> </u>		· · · · · · · · · · · · · · · · · · ·		Ts 2	
	1/17/2007			100000			
3.	Date of filing/registration in Florida	a <u>.</u> 4		Document n	umber		
5. (a)	Mitchell Alkins Better Livi Registered Agent and Registered Office shown on the	records of the F	orida Dept. of Sta	<u>-</u> te:			
	Registered Office Address MUST BE FLORIDA	STREET ADD	RESS)			,	
				_ >6	old adda	5)	
	Boan Rober	, F <u>L</u>	3431		ਂ ≨⊱ ਤ	l	
(b)	MUMAN Alkins Boltz Enter name of NEW Registered Agent and/or NEW		ce address:	lic	APR -9 PM 12: 24		
	1500 SW 30th AW. SU	14 142		- . <u>-</u>		ED	
	NEW Registered Office Address:				TATE ORIDA	2	
	Boynton Beach	, FL	33486		True and add	*	
the cha agent v	imited liability company is not organized und ange or changes are made, the Florida street a will be identical. Or, in the case of a Florida ere authorized by an affirmative vote of the n icles of organization or the operating agreement	address of the limited liabili nembers of the	registered office ty company, it to limited liability ted liability co	ce and the bus is hereby cont ty company o	iness office of t firmed that the c r as otherwise p	he registered change(s)	
Signa	fure of a member or authorized representative of a mem	nber	1 11	Printed or type	ed name of signee		
I here provisi the obi to mer notified	by accept the appointment as registered ager ions of all statuites relative to the proper and ligations of my position as registered agent a ely reflect a change in the registered office a d in writing of this change.	nt and agree to complete per; is provided foi ddress, I here	o act in this cap formance of my r in Chapter 60 by confirm tha	pacity. I furth duties, and I 15, F.S. Or, if t the limited li	ier agree to com am familiar wit this document i ability company	iply with the h and accept s being filed has been	
		E	*	-	,	1	
Signatu	re of Registered Agent					in the second	

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