

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000023081

Entity Name: K-LIFE HOUSE, LLC

FILED
Oct 30, 2008
Secretary of State

Current Principal Place of Business:

17550 COBBLESTONE LANE
CLERMONT, FL 34711 US

New Principal Place of Business:

Current Mailing Address:

17550 COBBLESTONE LANE
CLERMONT, FL 34711 US

New Mailing Address:

PO BOX 770538
WINTER GARDEN, FL 34777 US

FEI Number: 20-5792210 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:

CREEDEN, KRIS
17550 COBBLESTONE LANE
CLERMONT, FL 34711 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: KRIS CREEDEN

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CREEDEN, KRIS
Address: 17550 COBBLESTONE LANE
City-St-Zip: CLERMONT, FL 34711 US

Title: MGRM () Delete
Name: CREEDEN, LAURA
Address: 17550 COBBLESTONE LANE
City-St-Zip: CLERMONT, FL 34711 US

Title: MGRM () Delete
Name: ROSS, CHUCK
Address: 2139 KANE PARK WAY
City-St-Zip: WINTER MERE, FL 34786 US

Title: MGRM () Delete
Name: ROSS, ANGIE
Address: 2139 KANE PARK WAY
City-St-Zip: WINTER MERE, FL 34786 US

Title: MGRM () Delete
Name: HARPER, STEVE
Address: 12960 REAVES ROAD
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: MGRM () Delete
Name: HARPER, LISA
Address: 12960 REAVES ROAD
City-St-Zip: WINTER GARDEN, FL 34787 US

ADDITIONS/CHANGES:

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

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

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

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: LISA M HARPER

MGRM

10/30/2008

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