

L07000034041

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 JUN 16 PM 9:21

T. HAMPTON  
JUN 18 2010  
EXAMINER

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: INSTANT HEALTH IN AMERICA, 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:

RONALD K. WERNER  
Name of Person

INSTANT HEALTH IN AMERICA, LLC  
Firm/Company

1620 SWEETBAY WAY  
Address

HOLLYWOOD, FL. 33019  
City/State and Zip Code

RKENT615 @ AOL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RONALD K. WERNER at (954) 205-3628  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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

Pursuant to the provisions of sections 608.416 or 608.508, 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.

1. Name of the limited liability company: INSTANT HEALTH IN AMERICA, LLC

2. (a) Principal office address of limited liability company:



(Note: **MUST BE STREET ADDRESS**)

1620 SWEETBAY WAY

HOOLYWOOD, FL. 33019

(b) Mailing address of limited liability company:



(Note: **MAY BE POST OFFICE BOX**)

1620 SWEETBAY WAY

HOOLYWOOD, FL. 33019

MARCH 29, 2007

3. Date of filing/registration in Florida

L07000034041

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

MIAMI CENTER REGISTERED AGENTS, LLC

Registered Office Address:

201 SOUTH BRISCAVE BOULEVARD  
Suite 1200  
MIAMI, FL. 33131

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent:

RONALD K. WERNER

NEW Registered Office Address:

(**MUST BE FLORIDA STREET ADDRESS**)

1620 SWEETBAY WAY  
~~HOOLYWOOD, FL. 33019~~  
HOOLYWOOD, FL. 33019

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Ronald K. Werner  
Signature of a member or authorized representative of a member

RONALD K. WERNER  
Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Ronald K. Werner  
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314  
FILING FEE: \$25.00

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS