2008 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 23, 2008
Secretary of State

DOCUMENT# L07000047598

Entity Name: FACE & BODY HEALTY AGING, LLC

Current Principal Place of Business:

900 N. SWALLOWTAIL DR #105
PORT ORANGE, FL 32129

New Principal Place of Business:

Current Mailing Address:

900 N. SWALLOWTAIL DR #105
PORT ORANGE, FL 32129

New Mailing Address:

FEI Number: 33-1162681 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALBERT R. KEEFER,P.A.
4186 DAIRY CT., SUITE A
PORT ORANGE, FL 32127 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: ALBERT R. KEEFER

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: MELLEMA, DOUGLAS J
Address: 5954 ROCKO RD
City-St-Zip: PORT ORANGE, FL 32127

Title: MGRM ( ) Delete
Name: MELLEMA, JENNIFER A
Address: 5954 ROCKO RD
City-St-Zip: PORT ORANGE, FL 32127

ADDITIONS/CHANGES:

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

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: DOUGLAS J. MELLEMA MGRM 10/23/2008

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