

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000108262

Entity Name: LOVE YOUR HEALTH, LLC

FILED
Apr 03, 2012
Secretary of State

Current Principal Place of Business:

1271 NW 58TH TERRACE
SUNRISE, FL 33313

New Principal Place of Business:

Current Mailing Address:

1271 NW 58TH TERRACE
SUNRISE, FL 33313

New Mailing Address:

FEI Number: 68-0659530

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLS, BRENDA W
1271 NW 58TH TERRACE
SUNRISE, FL 33313 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: MILLS, BRENDA W
Address: 1271 NW 58TH TERRACE
City-St-Zip: SUNRISE, FL 33313

Title: MGR
Name: MILLS, SAMUEL D
Address: 1271 NW 58TH TERRACE
City-St-Zip: SUNRISE, FL 33313

Title: MGRM
Name: MILLS, NIKIA A
Address: 1271 NW 58TH TERRACE
City-St-Zip: SUNRISE, FL 33313

Title: MGRM
Name: MILLS, MARQUIS D
Address: 1271 NW 58TH TERRACE
City-St-Zip: SUNRISE, FL 33313

Title: MGRM
Name: MILLS, MARKEISHA A
Address: 1271 NW 58TH TERRACE
City-St-Zip: SUNRISE, FL 33313

I hereby 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: BRENDA W MILLS

MGR

04/03/2012

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