2009 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 27, 2009
Secretary of State

DOCUMENT# L07000117834

Entity Name: NATURAL FIT LLC

Current Principal Place of Business:

3819 NW 53RD STREET
BOCA RATON, FL 33496

New Principal Place of Business:

5030 CHAMPION BOULEVARD
G6241
BOCA RATON, FL 33496

Current Mailing Address:

3819 NW 53RD STREET
BOCA RATON, FL 33496

New Mailing Address:

5030 CHAMPION BOULEVARD
G6241
BOCA RATON, FL 33496

FEI Number: 26-1560577 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
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:

COHN, ALAN B
100 WEST CYPRESS CREEK ROAD, SUITE 700
FT. LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

COHN, ALAN B ESQ.
100 WEST CYPRESS CREEK ROAD, SUITE 700
FT. LAUDERDALE, FL 33309 US

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: ALAN B. COHN, ESQ. 10/27/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: BUCHBINDER, STEPHEN
Address: 3819 NW 53RD STREET
City-St-Zip: BOCA RATON, FL 33496

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: BUCHBINDER, STEPHEN
Address: 5030 CHAMPION BOULEVARD G 6241
City-St-Zip: BOCA RATON, FL 33496

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: STEPHEN BUCHBINDER MGR 10/27/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date