

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000046918

**FILED**  
**Sep 30, 2010**  
**Secretary of State**

**Entity Name:** LIVE LIFE COUNSELING, LLC

**Current Principal Place of Business:**

1345 CLAY ST  
WINTER PARK, FL 32789

**New Principal Place of Business:**

**Current Mailing Address:**

1345 CLAY ST  
WINTER PARK, FL 32789

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MATTHEW, DEANE  
1345 CLAY ST  
WINTER PARK, FL 32789 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: DEANE MATTHEW

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: MATTHEW, DEANE  
Address: 1345 CLAY ST  
City-St-Zip: WINTER PARK, FL 32789

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: DEANE MATTHEW

MGR

09/30/2010

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