

2013 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L10000010315

FILED
Feb 28, 2013
Secretary of State

Entity Name: DIVERSIFIED HEALTH AND WELLNESS SOLUTIONS, LLC

Current Principal Place of Business:

509 CHARLES PLACE
BRANDON, FL 33511

New Principal Place of Business:

12007 WEST POND WAY
TAMPA, FL 33635

Current Mailing Address:

PO BOX 771
SAFETY HARBOR, FL 34695

New Mailing Address:

303 MAIN ST
#771
SAFETY HARBOR, FL 34695

FEI Number: 27-1723713

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SOTO, VALERIE
509 CHARLES PLACE
BRANDON, FL 33511 US

Name and Address of New Registered Agent:

HOWARD, CYNTHIA
12007 WEST POND WAY
TAMPA, FL 33635 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: CYNTHIA M. HOWARD

02/28/2013

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: HOWARD, CYNTHIA M
Address: 12007 WEST POND E
City-St-Zip: TAMPA, FL 33635

Title: MGR
Name: SOTO, VALERIE
Address: 509 CHARLES PLACE
City-St-Zip: BRANDON, FL 33511

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: CYNTHIA M. HOWARD

MGRM

02/28/2013

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