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EXAMINER

## **COVER LETTER**

TO:	Registration Section Division of Corporations				
SUBJ	ECT: Lifetim	<u>ie Hea</u>	alth Co	onsu	lting, LLC
	Name of	Limite	d Liabi	lity Co	ompany
n .	o:				
Dear :	Sir or Madam:				
The e	nclosed Registered Agent/Registered	Office	Change	and f	ee(s) are submitted for filing.
Please	e return all correspondence concernin	g this n	natter to	the fo	ollowing:
		<b>5</b>			
	Kristin L Brandel				
	Name of Person				
	1.55.55				
Lifetime Health Consulting, LLC Firm/Company					
	1 In Desimpany				
	2006 NW 3rd Ave				
	Address				
	Delray Beach, FL 33444			_	
City/State and Zip Code					
Klbrandel@gmail.com  E-mail address: (to be used for future annual report notification)					
E.	-man address. (to be used for future annual report	nouncan	onj		
For fu	rther information concerning this ma	tter, ple	ase call	<b>:</b>	
	Kristin L Brandel	at (	989	`	295-0637
	Name of Person	ai (_		Area Co	ode & Daytime Telephone Number
	STREET/COURIER ADDRESS:				G ADDRESS:
	Registration Section Division of Corporations	Registration Section Division of Corporations			
	Clifton Building	P.O. Box 6327			
	2661 Executive Center Circle	Tallahassee, Florida 32314			
	Tallahassee, Florida 32301		1 41	iaiiass(	oe, i lottuu 223 tT
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	Enclosed is a check for the following	ing am	ount:		
	\$25 Filing Fee		□ s <sup>4</sup>	55 Fili	ng Fee & Certified Copy

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company:	Lifetime Health Consulting, LLC			
2. (a) Principal office address of limited liability con	mpany:250 S Ocean Blvd #260			
(Note: MUST BE STREET ADDRESS)	Delray Beach, FL 33483			
(b) Mailing address of limited liability company:	250 S Ocean Blvd # 260			
(Note: MAY BE POST OFFICE BOX)	Delray Beach, FL 33483			
04/15/2010	L10000040650			
3. Date of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office show	on on the records of the Florida Dept. of State:			
Registered Agent:	Kristin L Brandel			
Registered Office Address:	250 S Ocean Blvd #260 Delray Beach, FL 33483			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent:	r <u>NEW Registered Office address</u> :  Same- Kristin L Brandel			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	New- 2006 NW 3rd Ave  Delray Beach ,FL 33444			
If the limited liability company is not organized unde confirmed that after the change or changes are made, and the business office of the registered agent will be liability company, it is hereby confirmed that the char of the members of the limited liability company or as or the operating agreement of the limited liability con	the Florida street address of the registered officeridentical. Or, in the case of a Florida limited ones of a Florida limited officeringe(s) was/were authorized by an affirmative vote otherwise provided in the articles of organization pany.			
Signature of a metaber or authorized representative of a member  Kristin L Brandel	ORATIONS			
Printed or typed name of signee				
I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of the Chapter 608, F.S. Or, if this document is being filed address, I hereby confirm that the limited liability con	and agree to act in this capacity. I further agree to he proper and complete performance of my duties, ny position as registered agent as provided for in to merely reflect a change in the registered office npany has been notified in writing of this change.			

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent