

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000100764

Entity Name: MIND YOUR HEALTHCAST, LLC

FILED
Apr 27, 2012
Secretary of State

Current Principal Place of Business:

689 DOUGLAS AVE.
SUITE 101
ALTAMONTE SPRINGS, FL 32714 US

New Principal Place of Business:

Current Mailing Address:

689 DOUGLAS AVE.
SUITE 101
ALTAMONTE SPRINGS, FL 32714 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAYFIELD, DONALD D
1084 SHADOWMOSS CIRCLE
LAKE MARY, FL 32746 US

Name and Address of New Registered Agent:

MAYFIELD, DONALD D
689 DOUGLAS AVE SUITE # 101
ALTAMONTE SPRINGS, FL 32714 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:

04/27/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: MAYFIELD, DONALD D
Address: 689 DOUGLAS AVE. SUITE 101
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

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: DONALD D. MAYFIELD

MGRM

04/27/2012

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