

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000110826

**FILED**  
**Aug 28, 2012**  
**Secretary of State**

**Entity Name:** COMPOSITION NUTRACEUTICALS LLC

**Current Principal Place of Business:**

4629 BARCHETTA DR  
LAND O LAKES, FL 34639 US

**New Principal Place of Business:**

13547 FLADGATE MARK DRIVE  
RIVERVIEW, FL 33579 US

**Current Mailing Address:**

4629 BARCHETTA DR  
LAND O LAKES, FL 34639 US

**New Mailing Address:**

13547 FLADGATE MARK DRIVE  
RIVERVIEW, FL 33579 US

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MCCLURE, DAMIEN C  
4629 BARCHETTA DR  
LAND O LAKES, FL 34639 US

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

MCCLURE, DAMIEN C  
13547 FLADGATE MARK DRIVE  
RIVERVIEW, FL 33579 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: DAMIEN MCCLURE

08/28/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: MCCLURE, DAMIEN C  
Address: 13547 FLADGATE MARK DRIVE  
City-St-Zip: RIVERVIEW, FL 33579 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: DAMIEN MCCLURE

MGR

08/28/2012

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