

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L11000003138

**FILED**  
**Oct 03, 2013**  
**Secretary of State**

**Entity Name:** NUTREGLO PRODUCTS LLC

**Current Principal Place of Business:**

4128 SW 195 TERRACE  
MIRAMAR, FL 33029

**New Principal Place of Business:**

**Current Mailing Address:**

4128 SW 195 TERRACE  
MIRAMAR, FL 33029

**New Mailing Address:**

**FEI Number:** 27-4472532

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MELVIN, ERMA P  
4128 SW 195 TERRACE  
MIRAMAR, FL 33029 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:** ERMAMELVIN

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** CEO  
**Name:** MELVIN, ERMA P  
**Address:** 4128 SW 195 TERRACE  
**City-St-Zip:** MIRAMAR, FL 33029

**Title:** MGR  
**Name:** MELVIN, ERMA P  
**Address:** 4128 SW 195 TERRACE  
**City-St-Zip:** MIRAMAR, FL 33029

**Title:** SEC  
**Name:** MELVIN, ERMA P  
**Address:** 4128 SW 195 TERRACE  
**City-St-Zip:** MIRAMAR, FL 33029

**Title:** MGR  
**Name:** MELVIN, ERMA P  
**Address:** 4128 SW 195 TERRACE  
**City-St-Zip:** MIRAMAR, FL 33029 UN

**Title:** SEC  
**Name:** MELVIN, ERMA P  
**Address:** 4128 SW 195 TERRACE  
**City-St-Zip:** MIRAMAR, FL 33029 UN

**Title:** SEC  
**Name:** MELVIN, ERMA  
**Address:** 4128 SW 195 TERRACE  
**City-St-Zip:** MIRAMAR, FL 33029 UN

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:** ERMA P MELVIN

CEO

10/03/2013

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