

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000038717

**FILED  
Apr 10, 2012  
Secretary of State**

**Entity Name:** MOTHERING FROM SCRATCH, LLC

**Current Principal Place of Business:**

427 VICEROY TERRACE  
PORT CHARLOTTE, FL 33954

**New Principal Place of Business:**

**Current Mailing Address:**  
MOTHERING FROM SCRATCH, LLC  
PO BOX 495194  
PORT CHARLOTTE, FL 33949

**New Mailing Address:**

**FEI Number:** 45-1479808      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

HELGEMO, KATHLEEN M  
427 VICEROY TERRACE  
PORT CHARLOTTE, FL 33954 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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: HELGEMO, KATHLEEN M  
Address: 427 VICEROY TERRACE  
City-St-Zip: PORT CHARLOTTE, FL 33954 US

Title: MGRM  
Name: MEANS, MELINDA G  
Address: 154 SANTAREM CIRCLE  
City-St-Zip: PUNTA GORDA, FL 33983

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: KATHLEEN M HELGEMO

MGRM

04/10/2012

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