

2013 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L11000110376

Entity Name: UPHORIA HEALTH LLC

FILED
Dec 07, 2013
Secretary of State

Current Principal Place of Business:

3371 WEDGEWOOD LANE
THE VILLAGES, FL 32162

New Principal Place of Business:

1507 BUENOS AIRES BLVD.
THE VILLAGES, FL 32159

Current Mailing Address:

3371 WEDGEWOOD LANE
THE VILLAGES, FL 32162

New Mailing Address:

10395 SE SUNSET HARBOR ROAD
SUMMERFIELD, FL 34491

FEI Number: 45-4034421

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LESTER, ANGELA
3371 WEDGEWOOD LANE
THE VILLAGES, FL 32162 US

Name and Address of New Registered Agent:

LESTER, ANGELA
10395 SE SUNSET HARBOR ROAD
SUMMERFIELD, FL 34491 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: ANGELA LESTER

12/07/2013

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: LESTER, ANGELA H
Address: 10395 SE SUNSET HARBOR ROAD
City-St-Zip: SUMMERFIELD, FL 34491

Title: S
Name: LESTER, ANGELA H
Address: 10395 SE SUNSET HARBOR ROAD
City-St-Zip: SUMMERFIELD, FL 34491

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: ANGELA LESTER

MGR

12/07/2013

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