

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L11000115910

**Entity Name:** LONGEVITY DRUGS LLC

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

**Current Principal Place of Business:**

101 N FEDERAL HWY  
LAKE WORTH, FL 33460

**New Principal Place of Business:**

**Current Mailing Address:**

101 N FEDERAL HWY  
LAKE WORTH, FL 33460

**New Mailing Address:**

**FEI Number:** 45-3576571

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GOODKIN, RYAN R  
101 N FEDERAL HWY  
LAKE WORTH, FL 33460 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: RYAN GOODKIN

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: GOODKIN, RYAN R  
Address: 101 N FEDERAL HWY  
City-St-Zip: LAKE WORTH, FL 33460

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: RYAN GOODKIN

MGR

10/10/2012

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