

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000130095

FILED
Apr 30, 2012
Secretary of State

Entity Name: RECOVERY RESTART LLC

Current Principal Place of Business:

4475 WHISPERING PINES
WEST PALM BEACH, FL 33406 US

New Principal Place of Business:

6508 WASHINGTON ROAD
WEST PALM BEACH, FL 33405 US

Current Mailing Address:

4475 WHISPERING PINES
WEST PALM BEACH, FL 33406 US

New Mailing Address:

6508 WASHINGTON ROAD
WEST PALM BEACH, FL 33405 US

FEI Number: 30-0705409

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOODSIDE, MICHELLE L
4864 ORLEANS CT
SUITE D
WEST PALM BEACH, FL 33415 US

Name and Address of New Registered Agent:

WOODSIDE, MICHELLE L
6508 WASHINGTON ROAD
WEST PALM BEACH, FL 33405 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: MICHELLE L WOODSIDE

04/30/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: WOODSIDE, MICHELLE L
Address: 6508 WASHINGTON ROAD
City-St-Zip: WEST PALM BEACH, FL 33405 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: MICHELLE L WOODSIDE

MGRM

04/30/2012

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