

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L12000073761

**FILED**  
**Sep 30, 2014**  
**Secretary of State**

**Entity Name:** SHIP SHAPE WATER FITNESS SPECIALISTS, LLC

**Current Principal Place of Business:**

47 KALAMAZOO TRAIL  
PALM COAST, FL 32164

**New Principal Place of Business:**

**Current Mailing Address:**

47 KALAMAZOO TRAIL  
PALM COAST, FL 32164

**New Mailing Address:**

**FEI Number:** 45-5471523

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SMITH-LAMB, SHARON B  
47 KALAMAZOO TRAIL  
PALM COAST, FL 32164 US

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

SMITH, SHARON B  
47 KALAMAZOO TRAIL  
PALM COAST, FL 32164 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: SHARON B. SMITH

09/30/2014

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

Title: MGR  
Name: SMITH, SHARON B  
Address: 47 KALAMAZOO TRAIL  
City-St-Zip: PALM COAST, FL 32164

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 authorized to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: SHARON B. SMITH

MGR

09/30/2014

Electronic Signature of Authorized Person

Date