

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L12000095322

**FILED**  
**Aug 12, 2014**  
**Secretary of State**

**Entity Name:** LOVE AND WELLNESS LLC

**Current Principal Place of Business:**

2540 MIDDLETON GROVE DRIVE #B  
BRANDON, FL 33511

**New Principal Place of Business:**

10425 AUTUMN PLACE DRIVE  
302  
TAMPA, FL 33637 UN

**Current Mailing Address:**

2540 MIDDLETON GROVE DRIVE #B  
BRANDON, FL 33511

**New Mailing Address:**

10425 AUTUMN PLACE DRIVE  
302  
TAMPA, FL 33637 UN

**FEI Number:** 46-0716800

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPIEGEL & UTRERA PA  
1840 SOUTHWEST 22ND STREET  
4TH FLOOR  
MIAMI, FL 33145 US

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

HARRIS, VERONIKA  
10425 AUTUMN PLACE DRIVE  
302  
TAMPA, FL 33569 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: VERONIKA HARRIS

08/12/2014

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

Title: MGR  
Name: HARRIS, VERONIKA  
Address: 10425 AUTUMN PLACE DRIVE  
City-St-Zip: TAMPA, FL 33637

Title: MGR  
Name: LOVE, NAKISHA  
Address: 10425 AUTUMN PLACE DRIVE  
City-St-Zip: TAMPA, FL 33637

Title: MGR  
Name: HARRIS, VERONIKA  
Address: 10425 AUTUMN PLACE DRIVE  
City-St-Zip: TAMPA, FL 33637

Title: MGR  
Name: LOVE, NAKISHA  
Address: 10425 AUTUMN PLACE DRIVE  
City-St-Zip: TAMPA, FL 33637

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: VERONIKA HARRIS

MGR

08/12/2014

Electronic Signature of Authorized Person

Date