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#### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Commitment to Health (CTH), LLC	This is the control of the control o	-
(Name of Limite	ed Liability Company)	
The enclosed "Application by Foreign Limited Liabi Florida," Certificate of Existence, and check are sub- liability company to transact business in Florida		
Please return all correspondence concerning this mat	ter to the following:	
Lenore Mannella-Smith		
(Name	e of Person)	
Commitment to Health (CTH), LLC		
(Firm	/Company)	
160 West Camino Real #231		
	ddress)	
Boca Raton, Florida 33432		<u></u>
(City/State	e and Zip Code)	<del></del> -
For further information concerning this matter, pleas	e call:	
Lenore Mannella-Smith	at (954) 783-2522	
(Name of Person)	(Area Code & Daytime Telephone	Number)
STREET ADDRESS:	MAILING ADDRESS:	-,1
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
409 E. Gaines Street	P.O. Box 6327	
Tallahassee, Florida 32399	Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
□ \$125.00 Filing Fee □ \$130.00 Filing Fee & Certificate of St		ng Fee, Certificate Status & Certified Copy

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	imited Liability Company)
Delaware	3, 33-0967206
Jurisdiction under the law of which foreign limited lia ompany is organized)	
May 31, 2001	5 30 years
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
Not Applicable	
(Date first transacted busines (See sections 608.501 & 608.5	ss in Florida, if prior to registration.) 502 F.S. to determine penalty liability)
160 West Camino Real #231	
Boca Raton, FL 33432	
(Street A	Address of Principal Office)
If limited liability company is a manager-ma  The name and usual business addresses of th	ne managing members or managers are as follows:
Lenore Mannella-Smith, 160 West Camino Real	al #231, Boca Raton, FL 33432
Kent Smith, 160 West Camino Real #231, Boca	
	than 90 days old, duly authenticated by the official having custody of re
jurisdiction under the law of which it is organized. (Apl	hotocopy is not acceptable. If the certificate is in a foreign language, a
jurisdiction under the law of which it is organized. (A plus is a station of the certificate under oath of the translator must	hotocopy is not acceptable. If the certificate is in a foreign language, a st be submitted.)
jurisdiction under the law of which it is organized. (A plus is a station of the certificate under eath of the translator must	hotocopy is not acceptable. If the certificate is in a foreign language, a
jurisdiction under the law of which it is organized. (A plus is a station of the certificate under eath of the translator must be a Nature of business or purposes to be conducted.	hotocopy is not acceptable. If the certificate is in a foreign language, a st be submitted.)
jurisdiction under the law of which it is organized. (A plus is a station of the certificate under eath of the translator must be a Nature of business or purposes to be conducted.	hotocopy is not acceptable. If the certificate is in a foreign language, a t be submitted.)  acted or promoted in Florida: Sale of Aromatherapy
jurisdiction under the law of which it is organized. (A plus lation of the certificate under eath of the translator must.  Nature of business or purposes to be conducted to the conducted lations through Electronic Retail (Internet) with each of a minimiser of a minimiser of a minimiser of a minimiser of a minimiser.	thotocopy is not acceptable. If the certificate is in a foreign language, a st be submitted.)  Incred or promoted in Florida: Sale of Aromatherapy  Eventual expansion into traditional Retail environment.  In the submitted of a member.
jurisdiction under the law of which it is organized. (A phaslation of the certificate under eath of the translator must.  Nature of business or purposes to be conducted.  Lotions through Electronic Retail (Internet) with each of a miniber or (Infacordance with section 608.4)	thotocopy is not acceptable. If the certificate is in a foreign language, a st be submitted.)  Incred or promoted in Florida: Sale of Aromatherapy  Eventual expansion into traditional Retail environment.  In an authorized representative of a member.  408(3), F.S., the execution of this document constitutes
jurisdiction under the law of which it is organized. (A phaslation of the certificate under eath of the translator must.  Nature of business or purposes to be conducted.  Lotions through Electronic Retail (Internet) with each of a miniber or (Infacordance with section 608.4)	thotocopy is not acceptable. If the certificate is in a foreign language, a state submitted.)  Incred or promoted in Florida: Sale of Aromatherapy eventual expansion into traditional Retail environment.  In an authorized representative of a member.  408(3), F.S., the execution of this document constitutes

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1.	1. The name of the Limited Liability Company is:			
Co	mmitment to Health (CTH), LLC			
2.	The name and the Florida street address of the registered agent and office are:			
	Kent Smith			
	(Name)			
	160 West Camino Real #231			
	Florida Street Address (P.O. Box NOT ACCEPTABLE)			
	Boca Raton FL 33432			
	City/State/Zip			

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

West Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

# Delaware

PAGE 1

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "COMMITMENT TO HEALTH (CTH), LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIFTH DAY OF JULY, A.D. 2005.



Warriet Smith Hindson
Harriet Smith Windson, Secretary of State

AUTHENTICATION: 4043280

DATE: 07-25-05

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