2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M08000001053

Entity Name: BIO TECH NUTRIENTS, LLC

SPLENDOR IN THE GRASS, LLC

818 WEST BROOKS AVE.

City-St-Zip: NORTH LAS VEGAS, NV 89030

Name:

Address:

FILED Oct 09, 2009 Secretary of State

Current Principal Place of Business:		New Princi	New Principal Place of Business:		
818 WEST BROOKS AVE. NORTH LAS VEGAS, NV 89030		LEGAL DEF	818 WEST BROOKS AVE. LEGAL DEPARTMENT NORTH LAS VEGAS, NV 89030		
Current Mailing Address:		New Mailir	New Mailing Address:		
	F BROOKS AVE. AS VEGAS, NV 89030	LEGAL DEF	BROOKS AVE. PARTMENT AS VEGAS, NV 89030		
	: 74-3067940	I Number Not Appli did not receive the		()	
Name and	l Address of Current Registered Agent:	Name and	Address of New Registered Agent:		
1201 HAY TALLAHA The above	ATION SERVICE COMPANY S STREET SSEE, FL 323012525 US named entity submits this statement for the purpo e of Florida.	se of changing it	ts registered office or registered agent, o	or both	
SIGNATU	RE: CORPORATION SERVICE COMPANY				
	Electronic Signature of Registered Agent		Date		
MANAGING MEMBERS/MANAGERS:		ADDITIONS/C	ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip: Title: Name:	MGR () Delete GREEN, PATRICIA M 818 WEST BROOKS AVE. NORTH LAS VEGAS, NV 89030 MGR () Delete KUNZ, JOHN	Title: Name: Address: City-St-Zip: Title: Name:	() Change () Addition () Change () Addition		
Address: City-St-Zip:	818 WEST BROOKS AVE. NORTH LAS VEGAS, NV 89030	Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	MGR () Delete HEALTH IN THE FUTURE, LLC 818 WEST BROOKS AVE. NORTH LAS VEGAS, NV 89030	Title: Name: Address: City-St-Zip:	MGR (X) Change () Addition HEALTH FOR THE FUTURE, LLC 818 WEST BROOKS AVE. NORTH LAS VEGAS, NV 89030		
Title:	MGR () Delete	Title:	() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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.

Name:

Address:

City-St-Zip:

SIGNATURE: PATRICIA M. GREEN MGR 10/09/2009