

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# M13000006804

**FILED**  
**Oct 23, 2014**  
**Secretary of State**

**Entity Name:** HEALTHIER LIVING FLA LLC

**Current Principal Place of Business:**

2390 SONOMA DR. W.  
NOKOMIS, FL 34275

**New Principal Place of Business:**

7580 ANDORA DRIVE  
SARASOTA, FL 34238 UN

**Current Mailing Address:**

2390 SONOMA DR. W.  
NOKOMIS, FL 34275

**New Mailing Address:**

7580 ANDORA DRIVE  
SARASOTA, FL 34238 UN

**FEI Number:** 27-2490972

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PROSER, JAMES  
2390 SONOMA DR. W.  
NOKOMIS, FL 34275 US

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

PROSER, JAMES A  
7580 ANDORA DRIVE  
SARASOTA, FL 34238 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:** JAMES PROSER

10/23/2014

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

**Title:** MGR  
**Name:** PROSER, JAMES  
**Address:** 7580 ANDORA DRIVE  
**City-St-Zip:** SARASOTA, FL 34238 UN

**Title:** MGR  
**Name:** PROSER, ADOLEY  
**Address:** 7580 ANDORA DRIVE  
**City-St-Zip:** SARASOTA, FL 34238 UN

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:** JAMES PROSER

MGR

10/23/2014

Electronic Signature of Authorized Person

Date