

2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000003055

Entity Name: NBTY ACQUISITION, LLC**Current Principal Place of Business:**2100 SMITHTOWN AVENUE
RONKONKOMA, NY 11779**Current Mailing Address:**2100 SMITHTOWN AVENUE
RONKONKOMA, NY 11779**FEI Number:** 26-2669276**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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:**_____
Electronic Signature of Registered Agent_____
Date**Authorized Person(s) Detail :**

Title PRESIDENT, CFO
Name DIPAK, GOLECHHA
Address 2100 SMITHTOWN AVENUE
City-State-Zip: RONKONKOMA NY 11779

Title VP, SECRETARY
Name LOONEY, JOSEPH
Address 2100 SMITHTOWN AVENUE
City-State-Zip: RONKONKOMA NY 11779

Title VC
Name KAMIL, HARVEY
Address 2100 SMITHTOWN AVENUE
City-State-Zip: RONKONKOMA NY 11779

Title VP
Name O'KEEFE, BERNARD
Address 2100 SMITHTOWN AVENUE
City-State-Zip: RONKONKOMA NY 11779

Title AUTHORIZED MEMBER
Name NBTY INC.
Address 2100 SMITHTOWN AVENUE
City-State-Zip: RONKONKOMA NY 11779

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOSEPH LOONEY**SECRETARY****04/18/2017**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date