FORM 4

(Print or Type Pecnonces)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* CHRISTODORO JONATHAN			2. Issuer Name and Ticker or Trading Symbol HERBALIFE LTD. [HLF]					:	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director10% Owner					
800 W. OLYMPIC BLVD, SUITE 406			3. Date of Earliest Transaction (Month/Day/Year) 04/30/2014					Office	r (give title belo	ow)	Other (specify b	elow)		
(Street) LOS ANGELES, CA 90015			4. If Amendment, Date Original Filed(Month/Day/Year) 05/02/2014					-	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person					
(City)	· ·	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
1.Title of Sec (Instr. 3)					if Code (Instr. 8)		4. Securities Acquii (A) or Disposed of (Instr. 3, 4 and 5)		of (D)	Beneficial Reported	ally Owned Following Transaction(s)		Ownership Form:	Beneficial
				(Month/Day/Year	Cod	e V	Amour	(A) or (D)	Price	(Instr. 3 a	id 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common S	Stock	(04/30/2014(1)		A(2)	2,000	A	\$ 0	2,000			D	
		·	0.00.00.00.00.00.00.00.00.00.00.00.00.0	dies belieficially of	viied dir	Per	ntained i	no respon n this for	m are	not requ		spond unle	ss	1474 (9-02)
			Table II - I	Derivative Securit	ies Acqı	Per cor the	rsons whatained in form dis	no respon n this for splays a c	m are curren	not requ tly valid	uired to res		ss	1474 (9-02)
(Instr. 3) F		3. Transaction Date (Month/Day/Yo	Table II - I (a 3A. Deemed Execution Date any	Derivative Securit e.g., puts, calls, wa 4. Transaction Code (Instr. 8)	ies Acqı	Per cor the nired, I option (M eve es d d ,)	sons whatained in form distributed in form distributed in form distributed in formation in formation with the formation in	no respon n this for splays a c of, or Bene tible secur cisable on Date /Year)	eficiallities) 7. Tit Amo Unde Secur (Instr	not requitly valid y Owned tle and unt of erlying	OMB conf	spond unle	of 10. Ownersh Form of Derivatii Security Direct (I or Indire	11. Nature of Indire Beneficie (Instr. 4

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
CHRISTODORO JONATHAN 800 W. OLYMPIC BLVD SUITE 406 LOS ANGELES, CA 90015	X					

Signatures

Jonathan Christodoro	05/12/2014
**Signature of Reporting Person	Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Consists of restricted stock units granted under the Herbalife Ltd. 2014 Stock Incentive Plan.
- (2) This amendment is being filed to correct the erroneous prior reporting of the vesting schedule of the restricted stock units granted to the reporting person. This award will vest 100% on April 15, 2015.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.