FORM 4

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

OMB APPROVAL
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

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

	pe Response														
Name and Address of Reporting Person * COZZA KEITH				2. Issuer Name and Ticker or Trading Symbol HERBALIFE LTD. [HLF]					5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)X_ Director 10% Owner					
(Last) (First) (Middle) 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)				4. If Amendment, Date Original Filed(Month/Day/Year) 05/02/2014						6. Individual or Joint/Group FilingCheck Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
LOS AN	GELES, C	A 90015								_		d by More than	One Reporting	erson	
(City	r)	(State)	(Zip)		Tabl	le I - Non	-Derivati	ve Sec	curities A	Acquir	ed, Disp	osed of, or l	Beneficially	Owned	
1.Title of S (Instr. 3)	Instr. 3) Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, any	if ((A)	4. Securities Acqui (A) or Disposed of (Instr. 3, 4 and 5)		f (D) Beneficia		ant of Securities ally Owned Following d Transaction(s)		6. Ownership Form:	7. Nature of Indirect Beneficial
				(Month/Day/Ye	ear)	C- 1-	V Am		(A) or		(Instr. 3 and 4) Direct or Indi (I)		or Indirect (I)	Ownership (Instr. 4)	
Common	Stook		04/30/2014(1)			Code A(2)	2,0	ount	` /	Price	2,000			(Instr. 4)	
	Report on a s	separate line for	each class of secur	ities beneficially	own		Persons containe	who ı d in tl	his forn	n are	not requ		spond unle	ss	1474 (9-02)
	Report on a s	separate line for	Table II - 1	Derivative Secui	rities	s Acquire	Persons containe the form d, Dispos	who i d in th display	his forn lays a c	n are urren ficially	not requ tly valid	ired to res		ss	1474 (9-02)
Reminder:		3. Transaction Date (Month/Day/Y	Table II - 1 (3A. Deemed Execution Da ear) any	·	5. No of Do Se Aco	s Acquire	Persons containe the form d, Dispos	who in the displayed of, overtible were attion I	his form lays a c or Bene le securi able Date	ficially ties) 7. Tit Amou Under Secur	not requ tly valid y Owned le and unt of rlying	OMB conf	spond unle	of 10. Ownersl Form of Derivati Security Direct (I or Indire	11. Natural of Indirection Benefic Owners: (Instr. 4

Reporting Owners

D (O N (Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
COZZA KEITH 800 W. OLYMPIC BLVD SUITE 406 LOS ANGELES, CA 90015	X					

Signatures

Keith Cozza	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.