

**2020 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000052823

**Entity Name:** OH MY GOSH ALTERNATIVE MEDICINE & AROMA THERAPY  
SPA/SALON FORMULATIONS, LLC

**Current Principal Place of Business:**

202 NW 135TH WAY UNIT 45-310  
PLANTATION, FL 33325

**Current Mailing Address:**

202 NW 135TH WAY UNIT 45-310  
PLANTATION, FL 33325 US

**FEI Number: 30-0661431**

**Certificate of Status Desired: No**

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

FREDERICK, CANDICE N  
202 NW 135TH WAY UNIT 45-310  
PLANTATION, FL 33325 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:** CANDICE NICOLE FREDERICK

02/21/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name FREDERICK, CANDICE N  
Address 202 NW 135TH WAY UNIT 45-310  
City-State-Zip: PLANTATION FL 33325

*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:** CANDICE NICOLE FREDERICK

FOUNDER

02/21/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date