

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000047791

Entity Name: FOUNTAIN OF YOUTH MEDICAL SPA LLC

Current Principal Place of Business:

141 BELLAGIO CIRCLE
SANFORD, FL 32771

Current Mailing Address:

225 W SEMINOLE BLVD. #402
SANFORD, FL 32771 US

FEI Number: 47-3919285

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PLUNKETT, KARLI A
225 W SEMINOLE BLVD. #402
SANFORD, FL 32771 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 AMBR
Name PLUNKETT, KARLI A
Address 225 W SEMINOLE BLVD. #402
City-State-Zip: SANFORD FL 32771

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: KARLI PLUNKETT

OWNER

01/16/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date