

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000111776

Entity Name: REJUVENARE GLAMOUR MEDICA, LLC

Current Principal Place of Business:

355 HENKEL CIRCLE
WINTER PARK, FL 32789

Current Mailing Address:

355 HENKEL CIRCLE
WINTER PARK, FL 32789 US

FEI Number: 81-2913458

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

VELARDE, CARLO
355 HENKEL CIRCLE
WINTER PARK, FL 32789 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 MGRM
Name VELARDE, CARLO
Address 355 HENKEL CIRCLE
City-State-Zip: WINTER PARK FL 32789

Title SECRETARY
Name HEIN, MAYA
Address 355 HENKEL CIRCLE
City-State-Zip: WINTER PARK FL 32789

Title MGR
Name VELARDE, CARLO
Address 355 HENKEL CIRCLE
City-State-Zip: WINTER PARK FL 32789

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: CARLO VELARDE

MANAGING PARTNER

04/28/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date