## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000198456

**Entity Name: BATEMAN SKINCARE LLC** 

**Current Principal Place of Business:** 

3931 COELEBS AVE

BOYNTON BEACH, FL 33436

**Current Mailing Address:** 

3931 COELEBS AVE

BOYNTON BEACH, FL 33436 US

FEI Number: 81-1304729 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MAIDHOF, REED 3931 COELEBS AVE

BOYNTON BEACH, FL 33436 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: REED MAIDHOF 02/24/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail:

Title **PARTNER** Title **PARTNER** 

DINWOODIE, JARROD COHN, MICHAEL Name Name Address

1086 6TH ST. NW 457 FDR DRIVE Address

APT. A1204

City-State-Zip: SALEM OR 97304 City-State-Zip: NEW YORK NY 10002

Title **PARTNER** 

MAIDHOF, REED Name

1760 PALM COVE BLVD Address

#5-308

City-State-Zip: DELRAY BEACH FL 33445

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: REED MAIDHOF **OWNER** Electronic Signature of Signing Authorized Person(s) Detail

02/24/2020

Date

**FILED** Feb 24, 2020

**Secretary of State** 

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