

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000206099

Entity Name: RESTORATION DOCTOR, LLC

Current Principal Place of Business:

10384 W STATE RD 84 STE 10
DAVIE, FL 33324

Current Mailing Address:

10384 W STATE RD 84 STE 10
DAVIE, FL 33324 US

FEI Number: 82-3068704

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DIAZ, RENE
10384 W STATE RD 84 STE 10
DAVIE, FL 33324 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 MGR
Name DIAZ, RENE
Address 10384 W STATE ROAD 84 STE 10
City-State-Zip: DAVIE FL 33324

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: RENE DIAZ

MGR

04/28/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date