

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000238081

**Entity Name:** DR. SCAR, LLC

**Current Principal Place of Business:**

359 VILLA DR S  
ATLANTIS, FL 33462

**Current Mailing Address:**

359 VILLA DR S  
ATLANTIS, FL 33462 US

**FEI Number:** 83-2229583

**Certificate of Status Desired:** No

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

ROUTHIER, MARIE NATHALIE SOLANGE  
359 VILLA DR S  
ATLANTIS, FL 33462 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:** MARIE NATHALIE SOLANGE ROUTHIER

02/06/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name ROUTHIER, MARIE NATHALIE  
SOLANGE  
Address 359 VILLA DR S  
City-State-Zip: ATLANTIS FL 33462

*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:** MARIE NATHALIE S ROUTHIER

MANAGING MEMBER

02/06/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date