2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M12000005183

Entity Name: REVITICELL HOLDINGS, LLC

Current Principal Place of Business:

4720 SALISBURY ROAD, SUITE 200 JACKSONVILLE, FL 32256

Current Mailing Address:

4720 SALISBURY ROAD, SUITE 200 JACKSONVILLE, FL 32256 US

FEI Number: 27-4433784 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

FRITTS, SUSAN M 4720 SALISBURY ROAD, SUITE 200 JACKSONVILLE, FL 32256 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:

Date Electronic Signature of Registered Agent

Title

Authorized Person(s) Detail :

Title MGRM Title MGRM

GRANFIELD REGENERATIVE Name BENDIS BIZ, LLC Name

THERAPEUTICS, LLC Address 4720 SALISBURY ROAD, SUITE 200

Address 4720 SALISBURY ROAD, SUITE 200 JACKSONVILLE FL 32256

City-State-Zip: JACKSONVILLE FL 32256 City-State-Zip:

Title **MGRM**

JCK ENTERPRISES, LLC Name Name FRILLING ENTERPRISES, LLC

Address 4720 SALISBURY ROAD, SUITE 200

Address 4720 SALISBURY ROAD, SUITE 200 City-State-Zip: JACKSONVILLE FL 32256

City-State-Zip: JACKSONVILLE FL 32256

Title MANAGING MEMBER Title MANAGING MEMBER

BOSTON BIODILIGENCE, LLC Name Name DIXON HELFER, FRANCE

Address 4720 SALISBURY ROAD, SUITE 200 Address 4720 SALISBURY ROAD, SUITE 200

JACKSONVILLE FL 32256 City-State-Zip: City-State-Zip: JACKSONVILLE FL 32256

Title MANAGING MEMBER Title MANAGING MEMBER

ROSE, VICTORIA K Name Name WERDMOLDER, LINDA M

Address 4720 SALISBURY ROAD, SUITE 200 Address 4720 SALISBURY ROAD, SUITE 200

JACKSONVILLE FL 32256 City-State-Zip: JACKSONVILLE FL 32256 City-State-Zip:

Continues on page 2

MGRM

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.

01/17/2015 CAO SIGNATURE: SUSAN FRITTS

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED Jan 17, 2015

Secretary of State

CC6706520243

Authorized Person(s) Detail Continued:

TitleMANAGING MEMBERTitleMANAGING MEMBERNameWERDMOLDER, DIEDERIK J KNameJOHN MURRAY, MD, LLC

Address 4720 SALISBURY ROAD, SUITE 200 Address 4720 SALISBURY ROAD, SUITE 200

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