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TRANSMITTAL LETTER

то:	Amendment Section Division of Corporations					A.E seeq
SUBJ	ECT: Rejuvenation Cente	rs, LLC				
0020		Name of Limit	ed Liability	Company)		
DOC	UMENT NUMBER: L0000	0015628				*
The en	nclosed Resignation of Registong.	ered Agent for	r a Limited	Liability Com	pany and fee are	submitted
Please	return all correspondence cor	ncerning this i	matter to th	e following:		-
David	418/					•
David	d Wagener (Name of Pers	<u>(m)</u>				
	(Name of Fera	011)				
Adva	nced Dermatology Manage	ement, Inc.				
	(Name of Firm/Co	mpany)				
					,	
1111	Park Centre Blvd, Suite 36	30				
	(Address)		•			
Mian	ni, Florida 33169					
	(City/State and Zir	Code)				
	•	,	4.		,	4 2
For fu	rther information concerning	this matter, pl	ease call:			
David	l Wagener	a+ (305	623-5595		
	(Name of Person)	at ((Area Code	& Daytime Te	lephone Number)	
liabilit	ed is a check made payable to y company or \$25.00 for an a y company.	the Florida I dministrative	Department ly dissolve	t of State for \$3 d, voluntarily o	85.00 for an activ lissolved or with	re limited drawn limited
Ameno Divisio P.O. B	In Address: Iment Section on of Corporations ox 6327 assec, FL 32314	Street Adda Amendment Division of 409 E. Gain Tallahassee,	Section Corporation es Street		ड क्रम्प १८ १ - क्ष <u>-</u>	- سد، ۱۰۰۰

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, Jodi B. Laurence	, hereby resign as Managing Member (Title)	
of Rejuvenation Centers, LLC	· · · · · · · · · · · · · · · · · · ·	
(Limited	Liability Company)	
a limited liability company organized under the	he laws of the State of Florida,	
Effective as of N	has been notified in writing of the resignation. Wember 1, 2002 Wence ager, managing member or member)	
	04 MAY -3 All 9	

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

FILING FEE IS \$25.00