PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
03 DEC 12 AM 9:41
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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DOCUMENT # L02-27681

1. Limited Liability Company's Name

Forever Young of Palm Beach, LLC.
22523 Esplanada Circle W.
Boca Raton, FL 33433-5916

2. Principal Office Address	**3.** Mailing Office Address
22523 Esplanada Circle W.	22523 Esplanada Cir. W
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Boca Raton, FL	City & State: Boca Raton, FL
Zip: 33433-5916 Country: Palm Beach	Zip: 33433-5916 Country: Palm Beach

4. State/Country of Formation: Florida - Palm Beach County

5. Date Organized or Qualified To Do Business in Florida: 10-17-02

6. FEI Number: None ☐ Applied For ☑ Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☑ $5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name: Riguel K. Jasbón

Street Address (P.O. Box Number is Not Acceptable): 22523 Esplanada Circle W.

Suite, Apt. #, Etc.:

City: Boca Raton State: FL Zip Code: 33433-5916

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of Registered Agent: Riguel Jasbón REGISTERED AGENT MUST SIGN Date: November 10, 03

CR2E041 (9/01)

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGR	Riguel K. Jasbón	22523 Esplanada Cir. W	Boca Ratón, FL, 33433

REINSTATEMENT 2003
12/12/03 NR

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of Managing Member/Manager: Riguel Jasbón Date: Nov 10, 03 Daytime Phone #: 561 305 5005

Typed or printed name of signing Managing Member/Manager: Riguel K. Jasbón