2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000037661

Entity Name: COSMETIC MEDICINE NETWORK, LLC

FILED Dec 01, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2112 TYLER STREET HOLLYWOOD, FL 33020

Current Mailing Address: New Mailing Address:

2112 TYLER STREET 45 TUMBLEBROOK RD HOLLYWOOD, FL 33020 WOODBRIDGE, CT 06525

FEI Number: 20-4767035 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PETILLO, MICHAEL 2112 TYLER STREET HOLLYWOOD, FL 33020 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: MICHAEL PETILLO

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: () Change () Addition

 Name:
 PETILLO, MICHAEL
 Name:

 Address:
 2112 TYLER STREET
 Address:

 City-St-Zip:
 HOLLYWOOD, FL 33020
 City-St-Zip:

Title: MGR (X) Delete Title: () Change () Addition

 Name:
 MORRISSEY, NANCY
 Name:

 Address:
 2112 TYLER STREET
 Address:

 City-St-Zip:
 HOLLYWOOD, FL 33020
 City-St-Zip:

Title: MGR (X) Delete Title: () Change () Addition

 Name:
 PENA, MAYRA
 Name:

 Address:
 2112 TYLER STREET
 Address:

 City-St-Zip:
 HOLLYWOOD, FL 33020
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: MICHAEL PETILLO MGR 12/01/2007