

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000072361

FILED
Sep 29, 2009
Secretary of State

Entity Name: ALLURE AESTHETIC CONSULTANTS, LLC

Current Principal Place of Business:

3000 SOUTH OCEAN DRIVE
#800
HOLLYWOOD, FL 33019

New Principal Place of Business:

Current Mailing Address:

3000 SOUTH OCEAN DRIVE
#800
HOLLYWOOD, FL 33019

New Mailing Address:

FEI Number: 51-0596482 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

HOCKMAN, PETER M
550 BILTMORE WAY
SUITE 780
CORAL GABLES, FL 33134 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: PETER HOCKMAN

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: BIVENS, KURT
Address: 3000 SOUTH OCEAN DRIVE, #800
City-St-Zip: HOLLYWOOD, FL 33019

Title: () Change () Addition
Name:
Address:
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: JOSEPH K. BIVENS, MD

PRES

09/29/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date