

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000072361

**FILED**  
**Nov 11, 2010**  
**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 (X)**

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

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

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

BIVENS, JOSEH K  
3000 S. OCEAN DRIVE  
800  
HOLLYWOOD, FL 33019 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: JOSEPH BIVENS

11/11/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BIVENS, JOSEPH K  
Address: 3000 SOUTH OCEAN DRIVE, #800  
City-St-Zip: HOLLYWOOD, FL 33019

I hereby 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 BIVENS

MGR

11/11/2010

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