2008 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 17, 2008
Secretary of State

DOCUMENT# L07000036932

Entity Name: PHYSICIANS REJUVENATION CENTERS LLC

Current Principal Place of Business:

11911 US 1, STE 120
NORTH PALM BEACH, FL 33410

New Principal Place of Business:

Current Mailing Address:

11911 US 1, STE 120
NORTH PALM BEACH, FL 33410

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

TULLY, BRIAN P
11911 US HWY 1
120
NORTH PALM BEACH, FL 33408 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: BRIAN P TULLY 10/17/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: TULLY, BRIAN P
Address: 11911 US 1, STE 120
City-St-Zip: NORTH PALM BEACH, FL 33410

ADDITIONS/CHANGES:

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: BRIAN P TULLY MGR 10/17/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date