

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000028915

**FILED**  
**Jul 11, 2012**  
**Secretary of State**

**Entity Name:** FIRST AESTHETICIAN'S CHOICE FOR EDUCATION, LLC

**Current Principal Place of Business:**

4351 NE 107 CT  
BRONSON, FL 32621

**New Principal Place of Business:**

**Current Mailing Address:**

4351 NE 107 CT  
BRONSON, FL 32621

**New Mailing Address:**

2000 N BAYSHORE DR #116  
MIAMI, FL 33137

**FEI Number:** 27-2980423

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BARUTCU, AMBER C  
4351 NE 107 CT  
BRONSON, FL 32621 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BARUTCU, AMBER C  
Address: 4351 NE 107 CT  
City-St-Zip: BRONSON, FL 32621

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: AMBER C BARUTCU

MGM

07/11/2012

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