

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000092860

Entity Name: DERMASTUDIO, L.L.C.

**FILED**  
**Apr 19, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

825 EAST BURGESS ROAD  
PENSACOLA, FL 32504 US

**New Principal Place of Business:**

**Current Mailing Address:**

825 EAST BURGESS ROAD  
PENSACOLA, FL 32504 US

**New Mailing Address:**

1143 JAGUAR CIR  
GULF BREEZE, FL 32563 US

FEI Number: 27-3425270

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ETHRIDGE, CHRISTINE P  
825 EAST BURGESS ROAD  
PENSACOLA, FL 32504 US

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

CROWE, KATRINA L  
1143 JAGUAR CIR  
GULF BREEZE, FL 32563 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: KATRINA L CROWE

04/19/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: CROWE, KATRINA L  
Address: 825 EAST BURGESS ROAD  
City-St-Zip: PENSACOLA, FL 32504 US

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: KATRINA L CROWE

MS

04/19/2012

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