

2013 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L11000017634

FILED
Apr 12, 2013
Secretary of State

Entity Name: ANTI-AGING AND WELLNESS CENTER OF SOUTH FLORIDA, LLC

Current Principal Place of Business:

2247 PALM BEACH LAKES BLVD.
206
WEST PALM BEACH, FL 33409 US

New Principal Place of Business:

Current Mailing Address:

2247 PALM BEACH LAKES BLVD.
206
WEST PALM BEACH, FL 33409 US

New Mailing Address:

FEI Number: 27-4896423

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAREMONT, KATIA T M.D.
2247 PALM BEACH LAKES BLVD.
206
WEST PALM BEACH, FL 33409 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: KATIA LAREMONT

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: LAREMONT, KATIA T M.D.
Address: 2247 PALM BEACH LAKES BLVD., SUITE 206
City-St-Zip: WEST PALM BEACH, FL 33409 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: KATIA LAREMONT

PRES

04/12/2013

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