

**MIL00000005**

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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : CORP USA  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**Foreign Limited Liability Company  
TOTAL VEIN AND SKIN, L.L.C.**

Certificate of Status	0
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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2016 FEB -5 PM 4:34

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

H16000031087

TO: Registration Section  
Division of Corporations

SUBJECT: TOTAL VEIN AND SKIN, L.L.C.

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

H. GARY BERLIN

Name of Person

BERLIN &amp; BERLIN, P.A.

Firm/Company

16354 VINTAGE OAKS LANE

Address

DELRAY BEACH, FL 33484

City/State and Zip Code

garyberlin17@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

H. GARY BERLIN

Name of Contact Person

at ( 561 212-2671 )

Area Code

Daytime Telephone Number

**MAILING ADDRESS:**

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee☐ \$130.00 Filing Fee &  
Certificate of Status☐ \$155.00 Filing Fee &  
Certified Copy☐ \$160.00 Filing Fee, Certificate  
of Status & Certified Copy

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TALLAHASSEE, FL  
SECRETARY OF STATE

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS  
IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY  
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. TOTAL VEIN AND SKIN, L.L.C.

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited  
Liability Company," "L.L.C.," or "LLC.")

2. DELAWARE

(Jurisdiction under the law of which foreign limited liability  
company is organized)

3. 81-0887401

(FEI number, if applicable)

4.

(Date first transacted business in Florida, (prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 16354 VINTAGE OAKS LANE

DELRAY BEACH, FL 33484

(Street Address of Principal Office)

6. 16354 VINTAGE OAKS LANE

DELRAY BEACH, FL 33484

(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name:

H. GARY BERLIN, ESQ.

Office Address:

16354 VINTAGE OAKS LANE

DELRAY BEACH

(City)

, Florida 33484

(Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place  
designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree  
to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and  
accept the obligations of my position as registered agent.

H. Gary Berlin  
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

H. GARY BERLIN, MANAGER

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the  
jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath  
of the translator must be submitted)

JEFFREY W. Bullock

Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information  
submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

H. GARY BERLIN

Typed or printed name of signer

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Delaware**  
The First State

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Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TOTAL VEIN AND SKIN LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SECOND DAY OF JANUARY, A.D. 2016.

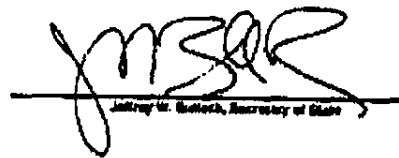
AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TOTAL VEIN AND SKIN LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF DECEMBER, A.D. 2015.



5914079 8300

SR# 20160360566

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State

Authentication: 201717397

Date: 01-22-16

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