## Pologool6732 Rejuvenation Genters

May 8, 2001

## VIA REGULAR MAIL

Florida Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

000004213200--1 -05/11/01--01136--018 \*\*\*\*105.00 \*\*\*\*\*35.08

Re: Statement of Change of Registered Office

Dear Sir or Madam:

Enclosed are completed Statements of Change of Registered Office for the following companies:

Rejuvenation Centers, LLC Rejuvenation Centers, Inc. Jomar Cosmeceuticals, Inc.

Also included is a check in the amount of \$105.00 for the filing fees for each corporation (\$35.00 each).

Please contact me should you have any questions.

Sincerely,

Trisha Drummet

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V SHEPARD MAY 18 2001

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

		tions 607.0502, 617.0 nized under the laws o			'lorida Statutes,
the unaersigne	a corporation organ Towns statement in	order to change its r	eoistered office	or registered a	gent, or both, in
		oraci to change in t	-S.2.0. on 9,,,,,	· · · · · · · · · · · · · · · · · · ·	
the State of Flo	f the corporation:	Rejuvenation	Centers,	Inc.	9
1. The name of	i die corporation				
2. The mailing	address of the corpo	oration: <u>2925 Ave</u>	entura Blv	d., Suite	207
		tion: <u>2/14/2001</u>	Docum	ent number: po	1000016732
				<u> </u>	<u>, , , , , , , , , , , , , , , , , , , </u>
4. The name a	nd address of the cur	rrent registered agent	and office:		
	Jodi B. Laur	rence	<u>-</u>		
		a Blvd., Suite	≥ 205		
		· · · · · · · · · · · · · · · · · · ·	<del></del>		ar co.
	Aventura, FI	w registered agent (if	ahangad) and/o	r registered offic	re (if changed)
5. The name a	nd address of the ne	(P. O. Box Not A	cceptable)	i legisuled offic	o (ii oimigou).
	<u>Jodi B. Laur</u>	ence	-	<del></del>	
	2925 Aventur	a Blvd., Suite	e 207		- -
	Aventura, FI	33180			_
The street add	lress of its registered ged, will be identic	d office and the street al.	address of the	business office	of its registered
Such change vauthorized by	was authorized by rethe board,	esolution duly adopte	d by its board o	of directors or by	y an officer so
1 cols	- Taus	mce		5/8	10/
(Signatur	re of an officer, chairman	or vice chairman of the boan	d)	(Date)	
Jodi B. L	aurence, Secr	retary	<u> </u>		, se ·
Having been to corporation, I further agree performance	named as registered I hereby accept the e to comply with the of my duties, and I d	d agent and to accept appointment as regist e provisions of all sta am familiar with and	service of proc tered agent and tutes relative to accept the obli	ess for the abov dagree to act in o the proper and igation of my po	e stated this capacity. l complete sition as
registered ago	ent.			5/0/0	1
100	(Signature of Registered	UNCI Agent)		<u>J / 8 / U</u> (Date)	<u>1</u>
Vajanina on hel	nalf of an entity:	<b>.</b>			
Jodi B.			•	Secretary	
	(Typed or Printed Name	)		(Capacity)	
		* * * FILING FEE	: \$35.00 * * *	_	

CR2E045(9/00)