

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000155497

Entity Name: REJUVENETICS, LLC

Current Principal Place of Business:

14101 NW 4 STREET
SUNRISE, FL 33325

Current Mailing Address:

14101 NW 4 STREET
SUNRISE, FL 33325 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RILEY, PATRICIA A
14101 NW 4 STREET
SUNRISE, FL 33325 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: _____

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name MDR, LLC
Address 14101 NW 4 STREET
City-State-Zip: SUNRISE FL 33325

Title MGRM
Name MPR EQUITIES, LLC
Address 500 EAST BROWARD BLVD SUITE
1710
City-State-Zip: FORT LAUDERDALE FL 33394

Title MGRM
Name ATWELL, AUSTIN
Address 14101 NW 4 STREET
City-State-Zip: SUNRISE FL 33325

Title MGRM
Name HOLDER, CHRIS
Address 14101 NW 4 STREET
City-State-Zip: SUNRISE FL 33325

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHRIS MAIORINO

MANAGING MEMBER

05/01/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date