## 2017 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 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: CHRIS MAIORINO 04/25/2017

Electronic Signature of Registered Agent

Date

FILED Apr 25, 2017

**Secretary of State** 

CC0676939273

## Authorized Person(s) Detail:

Title MGRM Name MDR, LLC

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.

Electronic Signature of Signing Authorized Person(s) Detail

CEO