### 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.

PRESIDENT

SIGNATURE: YVETTE RODRIGUEZ

Electronic Signature of Signing Authorized Person(s) Detail

**4011 W FLAGLER STREET** 

502 MIAMI, FL 33134 US

**Current Mailing Address:** 

DOCUMENT# L13000026225

4011 W FLAGLER STREET

MIAMI, FL 33134

502

**Current Principal Place of Business:** 

### FEI Number: 46-2146841

### Name and Address of Current Registered Agent:

RODRIGUEZ, YVETTE 7345 SW 36 STREET MIAMI, FL 33155 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

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: LIFE SPRING RESEARCH AND MED SPA, LLC

# Authorized Person(s) Detail :

Title	MGRM	Title	AMBR
Name	RODRIGUEZ, YVETTE	Name	MERLOS, LEDIS
Address	7345 SW 36 STREET	Address	4011 W FLAGLER STREET
City-State-Zip:	MIAMI FL 33155		502
		City-State-Zip:	MIAMI FL 33134
Title	AMBR		
Name	RODRIGUEZ, STEPHANIE		
Address	4011 W FLAGLER STREET 502		
City-State-Zip:	MIAMI FL 33134		

Certificate of Status Desired: No

FILED Jan 16, 2018 Secretary of State CC0676158743

Date

01/16/2018

Date