#### 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000046205

Entity Name: AESTHETIC MEDICINE INSTITUTE OF MIAMI, LLC

FILED
Jan 14, 2020
Secretary of State
2341222058CC

# **Current Principal Place of Business:**

1818 SW 1ST AVE #603 MIAMI. FL 33129

## **Current Mailing Address:**

1818 SW 1ST AVE #1512 MIAMI, FL 33129

FEI Number: 47-1691356 Certificate of Status Desired: No

#### Name and Address of Current Registered Agent:

HOULIHAN, GERALD J 504 ARAGON AVE MIAMI, FL 33134 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 MGR

Name SOTTILE, ANNA DR.
Address 1818 SW 1ST AVENUE

UNIT 1512

City-State-Zip: MIAMI FL 33129

SIGNATURE: ANNA SOTTILE

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.

**MGR** 

Electronic Signature of Signing Authorized Person(s) Detail

01/14/2020

Date