

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000046205

Entity Name: AESTHETIC MEDICINE INSTITUTE OF MIAMI, LLC

Current Principal Place of Business:

1818 SW 1ST AVE #1512
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

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: ANNA SOTTILE

MGR

03/22/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date