

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000064179

Entity Name: LEGENDS DERMATOLOGY, LLC

Current Principal Place of Business:

1497 LEGENDS BLVD
CHAMPIONS GATE, FL 33896

Current Mailing Address:

1497 LEGENDS BLVD
CHAMPIONS GATE, FL 33896 US

FEI Number: 47-1333202

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ESPINO HUERTA, ANDRES
714 HANOVER CT.
LAKELAND, FL 33813 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: ANDRES ESPINO HUERTA

01/19/2018

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name FUNIERU, IULIA DR.
Address 714 HANOVER COURT
City-State-Zip: LAKELAND FL 33813

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: IULIA FUNIERU

MANAGER

01/19/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date