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

SIGNATURE: RICHARD VEGA

Electronic Signature of Registered Agent

Authorized Person(s) Detail :		
Title	MGR	

Title	MGR	Title	MGR
Name	VEGA, RICHARD	Name	KENTON, DAVID
Address	5811 NE 22 TERRACE	Address	5811 NE 22 TERRACE
City-State-Zip:	FORT LAUDERDALE FL 33308	City-State-Zip:	FORT LAUDERDALE FL 33308

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.

FORT LAUDERDALE, FL 33308

Current Mailing Address:

5811 NE 22 TERRACE FORT LAUDERDALE, FL 33308 US

FEI Number: NOT APPLICABLE

Name and Address of Current Registered Agent:

VEGA, RICHARD 5811 NE 22 TERRACE FORT LAUDERDALE, FL 33308 US

SIGNATURE:

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Current Principal Place of Business: 5811 NE 22 TERRACE

DOCUMENT# L16000138811

Entity Name: CENTER FOR COSMETIC INJECTIONS, LLC

Certificate of Status Desired: No

Date

02/17/2017 Date

FILED Feb 17, 2017 Secretary of State CC9401018382

Electronic Signature of Signing Authorized Person(s) Detail