

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Jan 26, 2017
Secretary of State
CC0663859312

Entity Name: DERM CARE MANAGEMENT SHARED SERVICES, LLC

Current Principal Place of Business:

3850 HOLLYWOOD BLVD. SUITE 300
HOLLYWOOD, FL 33021

Current Mailing Address:

3850 HOLLYWOOD BLVD. SUITE 300
HOLLYWOOD, FL 33021 US

FEI Number: APPLIED FOR

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DERMCARE MANAGEMENT, INC.
3850 HOLLYWOOD BLVD. SUITE 300
HOLLYWOOD, FL 33021 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 SCHILLINGER, JEFFREY
Address 3850 HOLLYWOOD BLVD. SUITE 300
City-State-Zip: HOLLYWOOD FL 33021

Title MGR
Name DERM CARE MANAGEMENT, INC.
Address 3850 HOLLYWOOD BLVD. SUITE 300
City-State-Zip: HOLLYWOOD FL 33021

Title MGR
Name MAFFEI, CHRISTOPHER
Address 3850 HOLLYWOOD BLVD. SUITE 300
City-State-Zip: HOLLYWOOD FL 33021

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: CHRISTOPHER MAFFEI

MANAGER

01/26/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date