

**2024 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L23000102221

**Entity Name:** SKIN SCIENCE PARTNERS LLC

**Current Principal Place of Business:**

1700 N MCMULLEN BOOTH RD STE B3  
CLEARWATER, FL 33759

**Current Mailing Address:**

1700 N MCMULLEN BOOTH RD STE B3  
CLEARWATER, FL 33759 US

**FEI Number:** 92-2564399

**Certificate of Status Desired:** No

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

VADHULAS, PRASHANT  
1700 N MCMULLEN BOOTH RD, SUITE B3  
CLEARWATER, FL 33759 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 AMBR  
Name CANDELA BOLIVAR, LUISA F  
Address 1700 N MCMULLEN BOOTH RD, SUITE B3  
City-State-Zip: CLEARWATER FL 33759

Title AMBR  
Name VADHULAS, PRASHANT  
Address 1700 N MCMULLEN BOOTH RD B3  
City-State-Zip: CLEARWATER FL 33759

*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:** PRASHANT VADHULAS

AMBR

10/12/2024

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date