

2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000004880

Entity Name: DIVINE DERMATOLOGY, PLLC

Current Principal Place of Business:

2191 9TH AVE. N , SUITE 100
ST PETERSBURG, FL 33713

Current Mailing Address:

3950 39TH CIRCLE SOUTH
SAINT PETERSBURG, FL 33711

FEI Number: 71-0955196

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SIMS-ROBERTSON, CAROL
3950 39TH CIRCLE SOUTH
SAINT PETERSBURG, FL 33711 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 WILSON, ANGELA D
Address 3950 39TH CIRCLE SOUTH
City-State-Zip: SAINT PETERSBURG FL 33711

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: ANGELA WILSON

PRACTICE MANAGER

02/08/2016

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date