#### **2025 FOREIGN LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# M18000003003

Entity Name: SPC DERMATOLOGY MANAGEMENT, LLC

FILED
Jan 30, 2025
Secretary of State
9493577204CR

# **Current Principal Place of Business:**

1560 SAWGRASS CORPORATE PARKWAY

SUITE 220

SUNRISE, FL 33323

## **Current Mailing Address:**

400 NO. STEPHANIE ST STE 400 HENDERRSON, NV 89014-6692 US

FEI Number: 65-0008133 Certificate of Status Desired: Yes

### Name and Address of Current Registered Agent:

REDFEARN, SARAH 1200 S PINE ISLAND RD PLANTATION, FL 33324 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: SARAH REDFEARN 01/30/2025

Electronic Signature of Registered Agent Date

## Authorized Person(s) Detail:

Title MANAGING MEMBER

Name SPC DERMATOLOGY PARTNERS, LLC

Address 401 CITY AVE.

City-State-Zip: BALA CYNWYD PA 19004

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.

CEO

SIGNATURE: REUVEN PORGES