

P14000058190

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

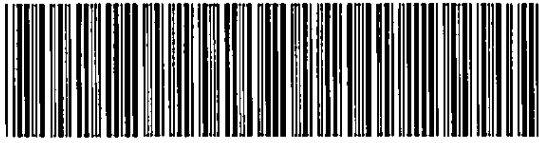
(Business Entity Name)

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TALLAHASSEE, FL

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Loom Luxury Linens, Inc.
_____ Name of Corporation

P14000058190
DOCUMENT NUMBER: _____

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jackie Rasmussen
_____ Name of Contact Person
Loom Luxury Linens
_____ Firm/Company
1306 E Broward Blvd
_____ Address
Fort Lauderdale FL 33301
_____ City/State and Zip Code
Jackie@loomlux.com
_____ E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jackie Rasmussen 954 9094442
_____ at () _____
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

