100000a450

| (| Requestor's Name | 2) | |
|------------------------|--------------------|----------------|--|
| (| (Address) | | |
| | (Address) | 1370 | |
| (| City/State/Zip/Pho | ne #) | |
| PICK-UP | WAIT | MAIL | |
| (Business Entity Name) | | | |
| (Document Number) | | | |
| Certified Copies | Certificate | es of Status | |

Special Instructions to Filing Officer:

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

FILED

Knott, Consoer, Ebelini Hart & Swett, P.A. ATTORNEYS-AT-LAW

George H. Knott *+ George L. Consoer, Jr. □ Mark A. Ebelini Thomas B. Hart 🗆 H. Andrew Swett Aaron A. Haak ◊+

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Michael E. Roeder, AICP Director of Zoning and Land Use Planning

Thart@knott-law.com

March 2, 2011

Florida Department of State **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Re:

Document No. L10000062450 Juchheim Cosmetics, LLC

Viller

Dear Sir/Madam:

On behalf of our client, Juchheim Cosmetics, LLC, please accept the enclosed Statement of Change of Registered Agent. Also enclosed is our check in the amount of \$25.00.

Very truly yours,

KNOTT CONSOER EBELINI HART & SWETT, P.A.

Paula A. Weller, FRP

Paralegal to Thomas B. Hart

Encis:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

1

-;

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

| Name of the limited liability company: | Juchheim Cosmetics, LLC |
|---|--|
| 2. (a) Principal office address of limited liability compan | y: 1625 Hendry Street |
| (Note: MUST BE STREET ADDRESS) | Fort Myers, Florida 33901 |
| (b) Mailing address of limited liability company: | c/o Thomas B. Hart, Esquire |
| (Note: MAY BE POST OFFICE BOX) | Knott Consoer Ebelini Hart & Swett, P.A P.O. Box 2449, Fort Myers, FL 33902-24 |
| June 10, 2010 | L10000062450 |
| 3. Date of filing/registration in Florida | 4. Document number |
| 5. (a) Registered Agent and Registered Office shown on | the records of the Florida Dept. of State: |
| Registered Agent: | George L. Consoer, Jr., Esquire |
| Registered Office Address: | Knott Consoer Ebelini Hart & Swett, P.A 1625 Hendry Street, Suite 301 Fort Myers, FL 33901 |
| | • |
| (b) Enter name of NEW Registered Agent and/or NE | W Registered Office address: |
| NEW Registered Agent: | Thomas B. Hart, Esquire |
| NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) | Knott Consoer Ebelini Hart & Swett, P.A 1625 Hendry Street |
| | Fort Myers ,FL 33901 |
| If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s of the members of the limited liability company or as othe or the operating agricument of the infitted liability company. Signature of a member of authorized representative of a member | lorida street address of the registered office |
| Juergen Kurt Juchheim, Managing Member Printed or typed name of signee | -7 P |
| I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pr and I am familiar with and accept the obligations of my po Chapter 608, F.S. Or, if this document is being filed to me address, thereby confirm that the limited liability compan | gran to get in this canacity Phyther gare |
| Signature of Registered Agent | • |
| | A |

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00