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J. HARRIS

COVER LETTER

TO: Registration Section **Division of Corporations** EG BEAUTY PRODUCTS LLC SUBJECT: Name of Limited Liability Company Dear Sir or Madam: The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Josh Lignana, Esq. Name of Person Spadea Lignanan LLC Firm/Company 1315 Walnut St., Suite 1532 Address Philadelphia, PA 19107 City/State and Zip Code jlignana@spadealaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Josh Lignana Area Code & Daytime Telephone Number Name of Person STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: ☐ \$55 Filing Fee & Certified Copy ☑ \$25 Filing Fee

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

1. N	ame of the limited liability company: EG BEAUT	Y PROD	DUCTS LLC		
2. (a)	Elizabeth Gomez		(b) EG BEAUTY PRODUCTS LLC		
2. (4.)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	12055 SW 42nd Manor, Apt 112		12055 SW 42nd Manor, Apt 112		
	Miramar, FL 33025-7994		Miramar, FL 33025-7994		
	August 18, 2017		817A000169 55: L17000176745		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)					
	Registered Agent and Registered Office shown on the records of Elizabeth Gomez	if the Florid	ida Dept. of State:		
Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 303 East Summer Street					
	Miramar	33025	5		
			<u> </u>		
(b)	Enter name of NEW Registered Agent and/or NEW Registered	ed Office ac	address:		
			·:		
	Elizabeth Gomez				
	NEW Registered Office Address:				
	12055 SW 42nd Manor, Apt 112				
	Miramar F	33025	5-7994		
signa Signa I here provise the obeto mer	will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the sture of a member or authorized representative of a member by accept the appointment as registered agent and as	of the reg liability e of the lin e limited ————————————————————————————————————	gistered office and the business office of the registered company, it is hereby confirmed that the change(s) imited liability company or as otherwise provided in		

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

Signature of Registered Agent