08/21/2012 12:17 9499559598 NRAI PAGE 01/03 vivision of Corporations https://efile.sumbiz.org/scripts/efilcovr.exe Stronic Filing Cover Sheet Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document. (((H12000209971 3)))

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : NRAI CORPORATE SERVICES, INC.-IRVIN

Account Number : I20080000054

: (949)955-9585

Fax Number

: (800)562-6304

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. * 5

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T-mail	Address:		¥+
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REGISTERED AGENT CHANGE BOSLEY, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

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8/21/2012 12:14 PM

COVER LETTER

Divisio	ment Section on of Corporations						
SUBJECT: Bosley, Inc. Name of Corporation							
		.poration					
DOCUMENT	· · · · · · · · · · · · · · · · · · ·						
The enclosed S	tatement of Change of Registered Office.	Agent and fee a	re submitted for filing.				
Please return al	ll correspondence concerning this matter	to the following:					
	Abby Deegan						
	Name of Cont	act Person					
NRAt Corporate Services, Inc.							
	Firm/Con	npany					
2875 Michelle Drive, Sulte 100							
	Addre	SS					
	Irvine, CA 92606						
	City/State and	Zip Code	and the state of t				
	adeegan@nrai.com						
	E-mail address: (to be used for future annual report notification)						
For further info	ormation concerning this matter, please ca	il1:					
Abby Deega		800	562-6439				
	Name of Contact Person	Area Code	& Daytime Telephone Number				
Enclosed is a \$	35.00 check made payable to the Departn	nent of State.					
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327	Amend Divisio Clifton	Address: Iment Section on of Corporations Building				
	Tallahassee, FL 32314		xecutive Center Circle assee, FL 32301				

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Delawate							
in order to change its registered office or registered agent, or both, in the State of Florida.							
I. The name of the corporation: Bosley, Inc.							
2. The principal office address: 9100 Wilshire Blvd., East Tower Penthouse							
Beverly Hills, CA 90212							
3. The mailing address (if different):							
4. Date of incorporation/qualification: 11/02/1995 Document number: F95000005360							
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)							
CT Corporation System							
1200 South Pine Island Road							
Plantation, FL 33324							
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):							
NRAI Services, Inc.	A .						
515 East Park Avenue	212						
P.O. Box NOT acceptable							
Tallahassee, FL 32301	`` <u> </u>						
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.	- [
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change. **Buthorized by the board, or the corporation has been notified in writing of the change. **Buthorized by the board, or the corporation has been notified in writing of the change. **Buthorized by the board, or the corporation has been notified in writing of the change. **Buthorized by the board, or the corporation has been notified in writing of the change.	۶۰۰ تو. ا الاستان						
Signature of the Officer of Africation Printed or Typed name and title							
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performence of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the curporation has been notified in writing of this change.							
August 20, 2012							
Signature of Registered Agent If signing on behalf of an entity:							
Nicole Pameli, Assistant Secretary							
Typed or Printed Name * * * FILING FEE: \$35.00 * * *							
KADALICA E ED PODIO							

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)