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#### KAKLIS, VENABLE & WITT, P.A.

### ATTORNEYS AT LAW 1400 4TH AVENUE WEST, BRADENTON, FLORIDA 34205

V. WILLIAM KAKLIS JOSEPH P. VENABLE RONALD E. WITT TELEPHONE:

941-747-1180

FACSIMILE:

941-746-9252

WEBSITE:

www.kvwlaw.net

EMAIL:

ron@kvwlaw.net

September 13, 2006

Division of Corporations P.O. Box 6327 Tallahassee, FI 32314

Re:

The Bronzing Bar, LLC

To Whom It May Concern:

Enclosed please find the original Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company for the above referenced corporation, along with a check in the amount of \$25.00 for filing fee.

If you have any questions in this regard, please do not hesitate to contact me

Very truly yours,

RONALD E. WITT

REW/sw Enclosures

## **⊒**

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

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.

1. The name of the limited liability company is: The Bronzing Bar, LLC

1. The name of the limit	ed liability comp	any is: The Bronzir	g Bar, LLC		
2. The mailing address of	of the limited liab	oility company is:	14460 Sugar Bowl R	toad, Myakka, FL 342	251
March 17, 2006			L06000028507	<del></del> -	
3. Date of filing/registration in Florida		<del>_</del>	4. Document num	nber	
5. The name of the regist Florida Department of		ne registered office	address as shown	on the records of the	;
•	Stacey R. Ma	artineau			
•		Name			
	5807 28th Ave		<del> </del>		
	Dradanton El	Address			
	Bradenton, FL	City, State and Z	in .		
6 The 1 - 11	- <b>C</b> 41	• ,	•		
6. The name and address	of the new regis	tered agent and/or	office:		
	Stacey R. Mar	tineau			
		Name			
	14460 Sugar B		****		
	Florida street	address (P.O. Box	NOT acceptable)	ZAS:	3 90
	Myakka	FL 342	51	<b>全</b> 榮	SEP
		City, State and Zi	)		5
If the limited liability conconfirmed that after the cand the business office o liability company, it is he of the members of the lip or the operating agreeme	change or change of the registered a creby confirmed mited liability cont of the limited	s are made, the Flogent will be identithat the change(s) impany or as other liability company.	orida street address cal. Or, in the case was/were authorize	of the registe <del>re</del> d off of a Florida Hanted d by an affirmative	AHgo: 5€
(Printed or typed name of signee	·)				
I hereby accept the appo comply with the provisio and I am familiar with a Chapter 608, F.S. Or, if address, I hereby confirm	ns of all statutes nd accept the oble this document is n that the limited	tered agent and ag relative to the pro igations of my pos being filed to mer liability company	ree to act in this ca per and complete p ition as registered i ely reflect a change has been notified in	pacity. I further ag erformance of my d agent as provided fo in the registered of writing of this cha	ree to ities, r in fice nge.
(Signature of Registered Agent)	ntin				

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