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(Requestor's Name)								
(Address)								
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(City/State/Zip/Phone #)								
PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
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SEURLIANASSEE, FLORIDA

VAL 12 215 PSCHROEDER

COVER LETTER

	Registration Section Division of Corporations							
SUBJE	COSMETICS LK, LLC							
	Name of Limited Liability Company							
Dear Sir	r or Madam:							
The enc	losed Registered Agent/Registered Off	fice Change a	and fee(s) are submitted for filing.					
Please r	eturn all correspondence concerning th	is matter to	he following:					
Leon h	Kohn							
	Name of Person	•						
Cosme	etics LK, LLC							
	Firm/Company		 _					
1000 V	West Pembroke Road #303							
	Address		· ·····					
Hallan	dale Beach, Florida 33009							
	City/State and Zip Code							
Lkohn	@cosmeticslk.com							
E-	mail address: (to be used for future and	nual report n	otification)					
For furt	her information concerning this matter	, please call:						
Leon K	Kohn	305	790-9639					
	Name of Person		Area Code & Daytime Telephone Number					
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314					
Enclosed is a check for the following amount:								
	2 \$25 Filing Fee	٥	☐ \$55 Filing Fee & Certified Copy					

INHS18 (2/14)

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

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability cosubmits the following statement in order to change its registered office or registered agent, or both, in the 5 Florida.

1.	Na	me of the limited liability company: COSMETIC	CS LK, LC	;				
2	(a)	1000 West Pembroke Road #303	(1	, Hallanda	ale Beach, Flori	da (3300	9
(()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		· -	Mailing address of limi (Note: MAY BE PO			-
		Hallandale Beach, Florida 33009		Hallanda —	ale Beach, Florid	da 3	3300	9
		02/05/2007		L0700001	13613			
3.5.	(a)	Date of filing/registration in Florida Leon Kohn	4.		Document numbe	Γ		
(b)	(4)	Registered Agent and Registered Office shown on the records 1200 STIRLING ROAD	- 2: 	<i>,</i> =				
		Registered Office Address (MUST BE FLORIDA STREET SUITE 7A-7B	<u>ET ADDRESS</u>	Σ	FIL 19 JUN 27 SCLALANS SCLAHASSS			
		DANIA BEACH	FL_33004		ত ত ল ল	Si.	27 AM	
	(b)	Leon Kohn Enter name of NEW Registered Agent and/or NEW Registered 1000 West Pembroke Road #303	STATE FLORIDA FLORIDA	A	8: \$60	J		
		NEW Registered Office Address:						
		Hallandale Beach	FL 33009		-			
the ag wa the	e cha ent v is/we e arti Signa	imited liability company is not organized under the inge or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member cles of organization or the operating agreement of the united proper and complete to the proper and complete of all statutes relative to the proper and complete.	s of the regit of liability cors of the limited	stered office ompany, it is nited liability liability com	e and the business is hereby confirmed by company or as of apany. Printed or typed name active I further assistant.	offic I tha herv c of s	te of the covine process	he reg change crovide
<i>no</i>	прес	ons of all statutes relative to the proper and compligations of my position as registered agent as provely reflect, a change in the registered office address in writing of this change. The of Registered Agent	ided för in i I hereby c	Chapter 605 onfirm that i	, F.S. Or, if this d the limited liability	ocui Ecoi	nent i npany	s bein : has l