

LD8000005892

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

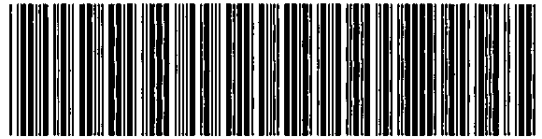
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Change of RA
LD8-5892

FILED
09 JAN 20 AM 10:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. CAUSSEAU

JAN 26 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Touch Spa LLC
(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:

Louise Tomaro
(Name of Person)

Touch Spa
(Firm/Company)

921 S. Park Rd Apt 110
(Address)

Hollywood fl. 33021
(City/State and Zip Code)

For further information concerning this matter, please call:

Louise Tomaro at (305) 807-9686
(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:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 9, 2009

LOUISA TOMARO
TOUCH SPA
921 S. PARK ROAD, APT. 110
HOLLYWOOD, FL 33021

SUBJECT: TOUCH SPA LLC
Ref. Number: L08000005892

We have received your document for TOUCH SPA LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an *individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.*

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

We have no record of a "TOCH SPA."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6918.

Nanette Causseaux
Document Specialist Supervisor

Letter Number: 309A00000626

**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. Name of the limited liability company: Touch Spa

2. (a) Principal office address of limited liability company: 921 S. Park Rd
APT 110
Hollywood, FL 33021
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

1/16/2008

3. Date of filing registration in Florida

4. Document number LO8000005892

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

Presidential Services Incorporated

Registered Office Address:

1217 Cape Coral Parkway
300
Cape Coral, FL 33904

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent:

~~Touch Spa~~ Louisa Tomaio

NEW Registered Office Address:
(MUST BE FLORIDA STREET ADDRESS)

921 S. Park Rd
110
Hollywood, FL 33021

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Louisa Tomaio
(Signature of a member or authorized representative of a member)

Louisa Tomaio
(Printed or typed name of signee)

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 performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Louisa Tomaio
(Signature of Registered Agent)