L10000041919

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EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
	On Soaps, LLC d 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 m	natter to the following:
Wendy W Marino	
Name of Person	
Accent On Soaps, LLC Firm/Company	
3910 NE 48th Avenue	는 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
Nation	
High Springs, FL 32643 City/State and Zip Code	
accentonsoaps@yahoo.com E-mail address: (to be used for future annual report notification	on)
For further information concerning this matter, ple	
Wendy W Marino at (at (at (at (at (at (at (at (at (at (727) 525-8248
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 amo	ount:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

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:	Accent On Soaps, LLC
2. (a) Principal office address of limited liability compan	y: 3910 NE 48th Avenue
(Note: MUST BE STREET ADDRESS)	High Springs, FL 32643
(b) Mailing address of limited liability company:	3910 NE 48th Avenue
(Note: MAY BE POST OFFICE BOX)	High Springs, FL 32643
April 19, 2010	L10000041919
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	Wendy W Marino ♣☆ ♣ ****
Registered Office Address:	3910 NE 48th Avenue
	, and the same of
(b) Enter name of NEW Registered Agent and/or NE	W Registered Office address
NEW Registered Agent:	wendy marino
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	215 Valencia BIVO unit 304 Belleair Bluffs FL 33770
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s of the members of the limited liability company or as othe or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	Florida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote rwise provided in the articles of organization
Wendy W Marino Printed or typed name of signee	_
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my particle to the property of the property of the province of the	agree to act in this capacity. I further agree to open and complete performance of my duties, sition as registered agent as provided for in erely reflect a change in the registered office by has been notified in writing of this change.
Signature of Registered Agent	₩

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

INHS18 (05/08)