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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383
From: Account Name : CAPITOL CORPORATE SERVICES, INC.
Account Number : I20160000048
Phone : (800)345-4647
Fax Number : (800)432-3622

16 OCT 12 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Email Address: _____

LLC REGISTERED AGENT CHANGE
ADROIT BEAUTY LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

2017 OCT 12 AM 10:52
TALLAHASSEE, FLORIDA

OCT 13 2016

S. YOUNG

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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: Adroll Beauty LLC
- 2. (a) c/o Hal J. Webb, Bilzin Sumberg et al. (b) c/o Hal J. Webb, Bilzin Sumberg et al.
 Principal office address of limited liability company: (Note: **MUST BE STREET ADDRESS**)
1450 Brickell Ave., 23rd Floor Mailing address of limited liability company: (Note: **MAY BE POST OFFICE BOX**)
1450 Brickell Ave., 23rd Floor
Miami, FL 33131 Miami, FL 33131

- 3. 11/12/2010 4. L10000117532
 Date of filing/registration in Florida Document number

- 5. (a) CW Corporate Services LLC
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
1001 Brickell Bay Drive, Suite 3112
 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Miami FL 33131

- (b) Capitol Corporate Services, Inc.
 Enter name of NEW Registered Agent and/or NEW Registered Office address:
155 Office Plaza Dr. Suite A
NEW Registered Office Address:
Tallahassee FL 32301

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.

Brigitte C. Shawhness Brigitte C. Shawhness
 Signature of a member or authorized representative of a member 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 605, 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.

W. Marie Case, esq. sec.
 Signature of Registered Agent

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

16 OCT 12 AM 11:00

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 TALLAHASSEE, FLORIDA