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EXAMINER



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CORPORATION

ON SERVICE COMPANY			
ACCOUNT NO. : I2000000195			
REFERENCE : 111787 7587885			
AUTHORIZATION Spelle Bleman			
COST LIMIT 0: 25.00			
ORDER DATE : February 28, 2012			
ORDER TIME : 9:30 AM			
ORDER NO. : 111787-047			
CUSTOMER NO: 7587885			
CHANGE OF AGENT			
NAME: STYLESCIENCE, LLC			
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:			
CERTIFIED COPY XX PLAIN STAMPED COPY			
CONTACT PERSON: Stephanie Milnes EXT# 2920			
EXAMINER:			

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: <u>STYLESCIEN</u>	NCE, LLC	_
2. (a) Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>)	y: 2 Sunshine Blvd. Ormond Beach, FL 32174	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		_
12/20/2004	T.11000130072	_
12/30/2004	L11000138862	
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:	C. Duke Landorf	_
Registered Office Address:	2 Sunshine Blvd. Ormond Beach FL 32174	- manner
	W Registered Office address:	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>		
<u>NEW</u> Registered Agent:	Corporation Service Company	_
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street	_
	Tallahassee ,FL 32301	_
If the limited liability company is not organized under the that after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the chereby confirmed that the change(s) was/were authorized bliability company or as otherwise provided in the articles of limited liability company.	et address of the registered office and the busing ase of a Florida limited liability company, it is by an affirmative vote of the members of the	ness is imited
(Signature of a member or authorized representative of a member)		
Maurcen Cathell, Authorized Person (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 pro am familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified	gree to act in this capacity. I further agree to oper and complete performance of my duties, as registered agent as provided for in Chapt change in the registered office address, I here I in writing of this change.	o and I er 608, eby
By: (Signature of Registered Agent) Sylvia Queppet, Asst. VP		

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