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19 AUG 19 PM 2:30

RA Change

AUG 29 2019

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Arte y Color Salon & 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:

Olga L Portillo
Name of Person

Arte y Color Salon & Spa LLC
Firm/Company

15871 Pines Blvd Suite 21
Address

Pembroke Pines< FL 33027
City/State and Zip Code

luccimel@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jorge Portillo at 954 605-4320
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

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STATE OF FLORIDA
DIVISION OF CORPORATIONS
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**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: Arte y Color Salon & Spa LLC

2. (a) _____ (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

15871 Pines Blvd Suite 21

5057 SW 162nd Ave

Pembroke Pines, FL 33027

Miramar, FL 33027

03/08/2012

L12000033061

3. _____
Date of filing/registration in Florida

4. _____
Document number

5. (a) Jorge A Portillo

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

15871 Pines Blvd Suite 21

Pembroke Pines, FL 33027

(b) Olga L Portillo

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

NEW Registered Office Address:

15871 Pines Blvd Suite 21

Pembroke Pines, FL 33027

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STATE DEPT OF CORP
DIVISION OF CORPORATIONS
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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.

Jorge A Portillo
Signature of a member or authorized representative of a member

Jorge A Portillo

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.

Jorge A Portillo
Signature of Registered Agent

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