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SECRETARY OF STAFE

B. BOSTICK

JAN - 2 2013

EXAMINER

Division of Corporations			
SUBJECT: Belletto Cosnetics La Name of Limited Liability Company	<u>/C</u>		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing	3 .		
Please return all correspondence concerning this matter to the following:			
Michael Benor			
Belletto Cosmetics	SECI	12 D	
5235 Red Cedar Dr #21	RETARY O	EC 31 F	
Fort Myers FL 33907 City/State and Zip Code	FLORBE	PH I: II	C
Manageneral Hold graph Com 1:-unil adds. (to be used for future annual reported theation)			
For further information concerning this matter, please eall:			
Michal Benor at (239) 600 - 9515 Name of Person at (239) Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32314			
Enclosed is a check for the following amount:			

S55 Filing Fee & Certified Copy

INH518 (5/08)

\$25 Filing Fee

TO: Registration Section

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: 1 2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 3. Date of filing/registration in Florida 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Sorhicer, INC Registered Agent: Registered Office Address: (b) Enter name of NEW Registered Agent and/or NEW Registered Office address **NEW** Registered Agent: **NEW** Registered Office Address: (MÚST BE FLORIDA STREET ADDRESS) If the limited liability company is not organized under the laws of the State of Florida, it is her 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 affirmation 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. or authorized representative of a member 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 daties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter (18, F.S. Or. if this document is being filed to merely reflect a change in the registered office address, I believe that the limited liability company has been notified in writing of this change.

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

INHS18 (05/08)



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 21, 2012

BENOR MICHAEL BELLETTO COSMETICS LLC 5235 RED CEDAR DRIVE, #21 FT. MYERS, FL 33907

SUBJECT: BELLETTO COSMETICS LLC

Ref. Number: L12000034823

We have received your document for BELLETTO COSMETICS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6051.

Letter Number: 512A00028062

Barbara Bostick Regulatory Specialist II

www.sunbiz.org